#### FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00082812 3 COMMITTEE NAME **OFFICE USE ONLY** Grapevine Republican Club Date Received **ELECTRONICALLY FILED** 01/16/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 2121 Lakeridge Dr. Date Hand-delivered or Date Postmarked Change of Address Grapevine, TX 76051 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Michael NAME NICKNAME LAST **SUFFIX** Oakley STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2121 Lakeridge Dr. STREET **ADDRESS** (Residence or Business) Grapevine, TX 76051 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2121 Lakeridge Dr. MAILING **ADDRESS** Grapevine, TX 76051 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (817) 488-9841 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2023 12/31/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Grapevine Republican Club			00082812	
14 COMMITTEE ACTIVITY	Candidates  (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures     (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
<b>15</b> CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M  X check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	817.00
	2. TOTAL POLITICA  (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	3,192.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	3,433.77
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	2,883.79
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<b>I</b>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Mich	ael Oakley	
		Signature of Ca	mpaign Treasure	er
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, tl	his the	day
		which, witness my hand and seal of office.		
Signature of officer ac	dministering oath	Printed name of officer administering oath	Title of office	r administering oath

### **SUBTOTALS - GPAC**

## FORM **GPAC**COVER SHEET PG 3

					3 of 14
17 COMM Grape		E NAME Republican Club	<b>18</b> Filer ID 00082812	(Ethics Commissio	n Filers)
19 SCHE	DULE	E SUBTOTALS SCHEDULE		SUBTOTAL A	AMOUNT
_	x]	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	3,192.00
	<u> </u>	SCHEDULE AL. MONETANT POLITICAL CONTRIBUTIONS		<b>3</b>	3,192.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	3,433.77
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this for	m.	1	Total pages Schedule A1: Sch: 1/4 Rpt: 4/14	
2	FILER NAME Grapevine R	epublican Club		3	Filer ID (Ethics Commission 00082812	n Filers)
4	The Date of Contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$50.00	
_		Grapevine, TX 76051				
8	Principal occu Retired	pation / Job title (See Instructions)  9	Employer (See Instructions	)		
	Date 09/20/2023	Full name of contributor out-of-state PAC (ID#: Abbott, Patsy Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
	Principal occu	Grapevine, TX 76051 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Retired	salon, cop due (coc mondedono)	Employer (Gee mondone)	,		
	Date 09/12/2023	Full name of contributor out-of-state PAC (ID#: Abbott, Patsy  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Grapevine, TX 76051				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/10/2023	Full name of contributor out-of-state PAC (ID#: Abbott, Patsy  Contributor address; City; State; Zip Code  Grapevine, TX 76051			Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 11/28/2023	Full name of contributor out-of-state PAC (ID#:Abbott, Patsy  Contributor address; City; State; Zip Code  Grapevine, TX 76051			Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		
		,				

	MONEI	ARY POLITICAL (	CONTRIBUTIO	INS		SCHEDUL	E <b>A1</b>
	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 2/4 Rpt: 5/14	
2	FILER NAME Grapevine R	epublican Club			3	Filer ID (Ethics Commission 00082812	n Filers)
4 Date 09/18/2023 5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$100.00			
8	Principal occu Real Estate	Grapevine, TX 76051 pation / Job title (See Instructions	s)	Employer (See Instructions     Jason Mitchell Group	S)		
	Date 08/10/2023	Full name of contributor Danny, Holifield Contributor address; City; S Grapevine, TX 76051	out-of-state PAC (ID#:_		•	Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>I</u> S)		
	Date 11/30/2023	Full name of contributor  David, McClelland  Contributor address; City; S	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$50.00
		Arlington, TX 76011	, <u> </u>		Ĺ		
	Attorney	pation / Job title (See Instructions	5)	Employer (See Instructions The McClelland Law Fir		PLLC	
	Date 09/14/2023	Full name of contributor David, McClelland Contributor address; City; S Arlington, TX 76011	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$50.00
	Principal occu Attorney	pation / Job title (See Instructions	s)	Employer (See Instructions The McClelland Law Fir		PLLC	
	Date 08/10/2023	Full name of contributor David, McClelland Contributor address; City; S Arlington, TX 76011	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$25.00
	Principal occu Attorney	pation / Job title (See Instructions	5)	Employer (See Instructions The McClelland Law Fir		PLLC	

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to	1	Total pages Schedule A1: Sch: 3/4 Rpt: 6/14			
2	FILER NAME Grapevine R	epublican Club			3	Filer ID (Ethics Commission 00082812	n Filers)
4	4 Date 09/14/2023 5 Full name of contributor out-of-state PAC (ID#:) Fello, Bob 6 Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$50.00			
_		Grapevine, TX 76051	1.				
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions N/A	5)		
	Date 09/14/2023	Full name of contributor Giardino, VIncent Contributor address; City; State	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$50.00
	Deinsinal assu	Fort Worth, TX 76102		Franks on (Cooks to the street of	_		
	Principal occupation / Job title (See Instructions)  Magistrate Judge  Employer (See Instruction  Tarrant County			5)			
	Date 07/03/2023	Full name of contributor  Oakley, Michael  Contributor address; City; State	out-of-state PAC (ID#:;			Amount of Contribution (\$)	\$500.00
		Grapevine, TX 76051					
	Principal occu Photographe	pation / Job title (See Instructions) er/Trainer		Employer (See Instructions Self	i)		
Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$50.00		
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions DeOtte Engineering	)		
	Date Full name of contributor out-of-state PAC (ID#:)  O9/14/2023 Tate, Frederick  Contributor address; City; State; Zip Code  Colleyville, TX 76034			Amount of Contribution (\$)	\$100.00		
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions CFO Shield	i)		
			ı				

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/4 Rpt: 7/14		
2	FILER NAME Grapevine R	epublican Club		3	Filer ID (Ethics Commission 00082812	n Filers)	
4	Date   5 Full name of contributor   out-of-state PAC (ID#:)   7		Amount of Contribution (\$)	\$25.00			
8	Principal occu	Colleyville, TX 76034 pation / Job title (See Instructions)	Employer (See Instructions	)			
_	Chief Econo		CSBS	,			
	Date 09/12/2023	Full name of contributor out-of-state PAC (ID#:_ Western, Scott Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00	
		Grapevine, TX 76051					
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 10/10/2023	Full name of contributor			Amount of Contribution (\$)	\$50.00	
		Grapevine, TX 76051					
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 11/30/2023	Full name of contributor out-of-state PAC (ID#:_ Western, Scott Contributor address; City; State; Zip Code Grapevine, TX 76051	)		Amount of Contribution (\$)	\$500.00	
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)			

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/7 Rpt: 8/14	Grapevine Republican Club 00082812
4 Date	5 Payee name
07/31/2023	Bank of the West
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$20.00	108 W NW Hwy
Expenditure from corporate funds	Grapevine, TX 76051
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Bank fees
	34.11.1335
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
08/31/2023	Bank of the West
Amount (\$)	Payee address; City; State; Zip Code
\$20.00	108 W NW Hwy
Expenditure from	Over 10 in a TV 70054
corporate funds	Grapevine, TX 76051
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Bank fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
09/30/2023	Bank of the West
Amount (\$)	Payee address; City; State; Zip Code
\$20.00	108 W NW Hwy
Ψ20.00	100 W NW HWy
Expenditure from corporate funds	Grapevine, TX 76051
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Bank fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/7 Rpt: 9/14	Grapevine Republican Club	00082812
4 Date	5 Payee name	
10/31/2023	Bank of the West	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$20.00	108 W NW Hwy	
Expenditure from		
corporate funds	Grapevine, TX 76051	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
LXI LIBITORE		Check if Austin, TX, officeholder living expense
		Bank fees
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Office field
Date	Payee name	
11/30/2023	Bank of the West	
Amount (\$)	Payee address; City; State; Zip Code	
\$20.00	108 W NW Hwy	
— Forestitus from		
Expenditure from corporate funds	Grapevine, TX 76051	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Bank fees
		Dalik ices
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	<b>9</b>	Office field
Data		
Date 12/29/2023	Payee name Bank of the West	
Amount (\$)	Payee address; City; State; Zip Code	
\$20.00	108 W NW Hwy	
Expenditure from		
corporate funds	Grapevine, TX 76051	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Bank fees
		balik lees
One make the ONE Wife diagram	Oscalidate (Office helder as as a	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
,		

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	l Co	mmittee Legal Services S  The Instruction Guide explains ho		-	s/Contract Labor ete this form.		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME			3	_	Filer ID	(Ethics Commission Fi	lers)
	Sch: 3/7 Rpt: 10/14		Grapevine Republican Club				1	00082812		
4	Date	5	Payee name							
	10/05/2023		Black Walnut Cafe				_			
6	Amount (\$)	7	Payee address; City; State;	Zip Coo	le					
	\$163.45		775 N Denton Tap Rd							
	Expenditure from corporate funds		Coppell, TX 75019							
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedu	dule)	(b)	Description				
	OF EXPENDITURE		Event Expense			Check if travel outs				
						Check if Austin, TX			expense	
						Coppell RC Soc	Cla	aı		
							_			
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Off	fice soug	ht			Office he	eld	
	Date		Payee name							
	11/28/2023		Costco							
	Amount (\$)		Payee address; City; State;	Zip Coo	le					
	\$87.38		2601 E State Hwy 114							
	Expenditure from corporate funds		Southlake, TX 76092							
	PURPOSE	(a)	Category (See Categories listed at the top of this schedu	dule)	(b)	Description				
	OF EXPENDITURE		Event Expense			Check if travel outs	sid	e of Texas. Com	olete Schedule T.	
	EXI ENDITORE					Check if Austin, T			expense	
						Christmas Club	) E	vent		
							_			
	Complete ONLY if direct		Candidate/Officeholder name Off	fice soug	ht			Office he	eld	
	expenditure to benefit C/O	1								
	Date		Payee name							
	11/28/2023		Costco							
	Amount (\$)		Payee address; City; State;	Zip Coo	le					
	\$60.95		2601 E State Hwy 114							
			•							
	Expenditure from corporate funds		Southlake, TX 76092							
	PURPOSE	(a)	Category (See Categories listed at the top of this schedu	dule)	(b)	Description				
	OF EXPENDITURE		Event Expense			Check if travel outs	sid	e of Texas. Com	olete Schedule T.	
	LAFLINDITORE					Check if Austin, T			expense	
						Christmas Club	) E	Event		
	Complete ONLY if direct		Candidate/Officeholder name Off	fice soug	ht			Office he	eld	
	expenditure to benefit C/OI	Η								
							_			

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	
Sch: 4/7 Rpt: 11/14		
	· · ·	
4 Date	5 Payee name	
11/28/2023	Farina's	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,372.96	420 S Main St	
, -, -, -, -, -, -, -, -, -, -, -, -, -,		
X Expenditure from	Out to the TV 70054	
corporate funds	Grapevine, TX 76051	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Christmas Club Event	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	н	
Date	Payee name	
08/02/2023	Kurilko, Chuck	
	· ·	
Amount (\$)	Payee address; City; State; Zip Code	
\$580.00	1200 Fuller-Wiser Rd.	
Expenditure from	#1521	
corporate funds	Euless, TX 76039	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Meeting - Picnic Caterer	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	· ·	
D-1-	T -	
Date	Payee name	
07/12/2023	Richey Company	
Amount (\$)	Payee address; City; State; Zip Code	
\$117.57	3910 Teleport Blvd	
Expenditure from corporate funds	Irving, TX 75039	
•		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  T-shirt printing  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	T-shirt printing Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	T-shirt printing	
	Tank pinting	
Complete ONLY 11	Condidate/Officeholder name	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
and a section of the		
		Λ-

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Loan Repayment/ Fees Office Overhead/F Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Sayires Salaries/Magas/C

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contra  The Instruction Guide explains how to complete this	· • • • • • • • • • • • • • • • • • • •
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/7 Rpt: 12/14	Grapevine Republican Club	00082812
4 Date	5 Payee name	
11/30/2023	Square	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$33.04	1455 Market St	
	Suite 600	
Expenditure from corporate funds	San Fransisco, CA 94103-1332	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	ription
OF EXPENDITURE	1 1 663	neck if travel outside of Texas. Complete Schedule T.
	,	neck if Austin, TX, officeholder living expense tronic processing fees
	Lieu	tionic processing rees
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	Н	
Date	Payee name	
08/16/2023	Stacy Furniture	
Amount (\$)	Payee address; City; State; Zip Code	
\$120.00	1901 S Main St	
Expenditure from corporate funds	Grapevine, TX 76051	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Desc	
EXPENDITURE	L Event Expense	neck if travel outside of Texas. Complete Schedule T.
	,	neck if Austin, TX, officeholder living expense ting Room
	IVICE	ang room
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	Н	
Date	Payee name	
09/14/2023	Stacy Furniture	
Amount (\$)	Payee address; City; State; Zip Code	
\$120.00	1901 S Main St	
Expenditure from corporate funds	Grapevine, TX 76051	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	ription
OF EXPENDITURE	Lvent Expense	neck if travel outside of Texas. Complete Schedule T.
	,	neck if Austin, TX, officeholder living expense
	Mee	ting Room
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	•	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/7 Rpt: 13/14	Grapevine Republican Club 00082812
4 Date	5 Payee name
10/12/2023	Stacy Furniture
6 Amount (\$) \$120.00	7 Payee address; City; State; Zip Code 1901 S Main St
Expenditure from corporate funds	Grapevine, TX 76051
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Meeting Room
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/16/2023	Stacy Furniture
Amount (\$)	Payee address; City; State; Zip Code
\$160.00	1901 S Main St
Expenditure from corporate funds	Grapevine, TX 76051
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Security
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/13/2023	Stacy Furniture
Amount (\$)	Payee address; City; State; Zip Code
\$160.00	1901 S Main St
Expenditure from corporate funds	Grapevine, TX 76051
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Security
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card Payment  The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 7/7 Rpt: 14/14	Grapevine Republican Club	00082812
4 Date	5 Payee name	
10/12/2023	Stacy Furniture	
6 Amount (\$) \$160.00	7 Payee address; City; State; Zip Code 1901 S Main St	
Expenditure from corporate funds	Grapevine, TX 76051	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Security
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough H	t Office held
Date	Payee name	
11/28/2023	Tom Thumb	
Amount (\$)	Payee address; City; State; Zip Code	
\$58.42	302 S Park Blvd	
Expenditure from corporate funds	Grapevine, TX 76051	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Christmas Club Event
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough H	t Office held