FORM CEC COUNTY EXECUTIVE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The CEC Instruction Guide explains how to complete this form. 00055976 3 COMMITTEE NAME **OFFICE USE ONLY** Austin County Republican Party (CEC) Date Received **ELECTRONICALLY FILED** 02/05/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 9510 FM 949 Date Hand-delivered or Date Postmarked Change of Address Cat Spring, TX 78933 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Charles NAME NICKNAME LAST **SUFFIX** Chuck **Beers** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 9510 FM 949 STREET **ADDRESS** (Residence or Business) Cat Spring, TX 78933 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 9510 FM 949 MAILING **ADDRESS** Catspring, TX 78933 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (979) 885-9523 PHONE REPORT January 15 30th day before election Final Report X **TYPE** 10th day after campaign treasurer 8th day before election July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2024 01/25/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/05/2024 General Special **GO TO PAGE 2**

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC COVER SHEET PG 2

2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Austin County Republi	can Party (CEC)			0005597	76
4 COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.))			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
5 CONTRIBUTION TOTALS	PLEDGES, LOAN CONTRIBUTIONS	ZED POLITICAL CON IS, OR GUARANTEE S MADE ELECTRON port qualifies for the high	ICALLY)	\$	0.00
	2. TOTAL POLITION	CAL CONTRIBUTI		\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ		,	\$	0.00
	4. TOTAL POLITIC	CAL EXPENDITUR	RES	\$	301.20
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			DAY \$	30,818.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			THE \$	0.00
6 AFFIDAVIT	<u> </u>			<u> </u>	
		true	vear, or affirm, under penalty of pe e and correct and includes all infor ler Title 15, Election Code.		
			Mr. Cha	ırles Beers	
			Signature of Ca		surer
AFELY NOTAD	V STAMB / SEAL ABOV	/ F	Signature of Se	ampaign rrea	Suici
AFFIX NOTAR	Y STAMP / SEAL ABOV	′E			
			, t	this the	day
of	, 20, to certi	fy which, witness my	hand and seal of office.		
Signature of officer a	dministoring acth	Drinted name of a	efficer administering cath	Title of a	fficer administering cath
Signature of officer a	ummistering Datif	Printed Harrie OF 0	fficer administering oath	ride of 0	fficer administering oath

SUBTOTALS - CEC

FORM CEC COVER SHEET PG 3

					3 01 5
	MMITTE	(Ethics Commission Filers)			
Au	stin Co	00055976			
l	HEDULI	SUBTOTAL AMOUNT			
NA	ME OF				
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	X	SCHEDULE E: LOANS		\$	0.00
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	301.20
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
10.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	_

	LOANS						SCH	EDULE E
	The Instruction Guide explains how to complete this form			ges Schedule E: L Rpt: 4/5				
2	2 FILER NAME Austin County Republican Party (CEC)				3	3 Filer ID (Ethics Commission Filers) 00055976		
4	TOTAL OF UN	IITEMIZED LOANS			I		\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:)	9 Loan Amou	int (\$)
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code			10 Interest Ra	
							11 Maturity Da	te
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See In	structions)			
14	14 Description of Collateral None			15 Check if personal funds were deposited into political account (See Instructions)				
16	GUARANTOR INFORMATION	17 Name of guarantor		<u> </u>			19 Amount Gu	aranteed (\$)
	not applicable	18 Guarantor address; City;	State;	Zip Code				
20 Principal occupation			21 Employer (See In	structions)				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I 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: 1/1 Rpt: 5/5	Austin County Republican Party (CEC) 00055976
4	Date	5 Payee name
	01/05/2024	City of Bellville
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$74.20	30 South Holland St
		Bellville, TX 77418
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	-	Check if Austin, TX, officeholder living expense Dec 23 utilities
		Dec 23 dundes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_	Date	Payee name
	01/22/2024	The Sealy News
	Amount (\$) \$227.00	Payee address; City; State; Zip Code
	Φ221.00	
		Sealy, TX 77474
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		advertising for forums
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	