

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

| | | | |
|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|------------------------------------------------------------------------|
| The GPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00015555 | 2 Total pages filed: 114 |
| 3 COMMITTEE NAME Associated Republicans of Texas Campaign Fund | | OFFICE USE ONLY | |
| | | Date Received ELECTRONICALLY FILED 02/26/2024 | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 807 Brazos, Ste. 601 Austin, TX 78701-2526 | | |
| | Date Hand-delivered or Date Postmarked | | |
| | Receipt # | Amount | |
| | Date Processed | | |
| | | Date Imaged | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR | FIRST | MI |
| | Mr. | Hector | |
| | | NICKNAME | SUFFIX |
| | | De Leon | |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE Building 1 901 S. Mopac, Ste. 300 Austin, TX 78746 | | |
| | | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Building 1 901 S. Mopac, Ste. 300 Austin, TX 78746 | | |
| | | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION |
| | (512) | 478-5308 | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Dissolution (Attach PAC-DR) |
| | <input type="checkbox"/> July 15 | <input checked="" type="checkbox"/> 8th day before election | <input type="checkbox"/> 10th day after campaign treasurer termination |
| | | <input type="checkbox"/> Runoff | |
| | | | |
| 10 PERIOD COVERED | Month Day Year | THROUGH | Month Day Year |
| | 01/26/2024 | | 02/24/2024 |
| 11 ELECTION | ELECTION DATE | ELECTION TYPE | |
| | Month Day Year 03/05/2024 | <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> Runoff <input type="checkbox"/> Other |
| | | <input type="checkbox"/> General | <input type="checkbox"/> Special |

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

| | |
|---------------------------------------------------------------------------|-----------------------------------------------------------|
| 12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund | 13 Filer ID (Ethics Commission Filers) 00015555 |
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|---------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|----------------------------------------------------|
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Steve Allison State Representative |
| | | B. Opposed |
| | 2. 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.) | |

| | | |
|-------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 1,582,296.77 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 2,433,363.17 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 1,794,349.70 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Hector De Leon

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

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| 12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund | 13 Filer ID (Ethics Commission Filers) 00015555 |
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|---------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-----------------------------------------------|
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Trent Ashby State Representative |
| | | B. Opposed |
| | 2. 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.) | |
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|------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-------------------------------------------------|
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Ernest Bailes State Representative |
| | | B. Opposed |
| | 2. 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.) | |
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|------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|----------------------------------------------|
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Keith Bell State Representative |
| | | B. Opposed |
| | 2. 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.) | |
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| 12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund | | 13 Filer ID (Ethics Commission Filers) 00015555 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Cindi Bulla State Representative B. Opposed |
| | 2. 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.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported DeWayne Burns State Representative B. Opposed |
| | 2. 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.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Giovanni Capriglione State Representative B. Opposed |
| | 2. 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.) | |

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| 12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund | | 13 Filer ID (Ethics Commission Filers) 00015555 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Angie Chen Button State Representative B. Opposed |
| | 2. 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.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Pat Curry State Representative B. Opposed |
| | 2. 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.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Drew Darby State Representative B. Opposed |
| | 2. 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.) | |

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| 12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund | | 13 Filer ID (Ethics Commission Filers) 00015555 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Jay Dean State Representative B. Opposed |
| | 2. 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.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Mano DeAyala State Representative B. Opposed |
| | 2. 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.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Jill Dutton State Representative B. Opposed |
| | 2. 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.) | |

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| 12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund | | 13 Filer ID (Ethics Commission Filers) 00015555 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Paul Dyson State Representative B. Opposed |
| | 2. 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.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Frederick Frazier State Representative B. Opposed |
| | 2. 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.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Robert Garza State Representative B. Opposed |
| | 2. 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.) | |

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| 12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund | | 13 Filer ID (Ethics Commission Filers) 00015555 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Stan Gerdes State Representative B. Opposed |
| | 2. 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.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Charlie Geren State Representative B. Opposed |
| | 2. 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.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Cody Harris State Representative B. Opposed |
| | 2. 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.) | |

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| 12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund | | 13 Filer ID (Ethics Commission Filers) 00015555 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Justin Holland State Representative B. Opposed |
| | 2. 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.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Skeeter Hubert State Representative B. Opposed |
| | 2. 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.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Jacey Jetton State Representative B. Opposed |
| | 2. 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.) | |

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| 12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund | | 13 Filer ID (Ethics Commission Filers) 00015555 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Ken King State Representative B. Opposed |
| | 2. 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.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Stan Kitzman State Representative B. Opposed |
| | 2. 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.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported John Kuempel State Representative B. Opposed |
| | 2. 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.) | |

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| 12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund | | 13 Filer ID (Ethics Commission Filers) 00015555 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Stan Lambert State Representative B. Opposed |
| | 2. 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.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Morgan Meyer State Representative B. Opposed |
| | 2. 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.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Dade Phelan State Representative B. Opposed |
| | 2. 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.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Dade Phelan State Representative B. Opposed |
| | 2. 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.) | |

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| 12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund | | 13 Filer ID (Ethics Commission Filers) 00015555 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported JR Ramirez State Representative B. Opposed |
| | 2. 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.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Glenn Rogers State Representative B. Opposed |
| | 2. 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.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Hugh Shine State Representative B. Opposed |
| | 2. 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.) | |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

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|---------------------------------------------------------------------------|-----------------------------------------------------------|
| 12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund | 13 Filer ID (Ethics Commission Filers) 00015555 |
|---------------------------------------------------------------------------|-----------------------------------------------------------|

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Hatch Smith State Representative |
| | | B. Opposed |
| | 2. 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.) | |
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|------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------------------------|
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Reggie Smith State Representative |
| | | B. Opposed |
| | 2. 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.) | |
| | | |

| | | |
|------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-------------------------------------------------|
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported David Spiller State Representative |
| | | B. Opposed |
| | 2. 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.) | |
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| 12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund | | 13 Filer ID (Ethics Commission Filers) 00015555 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Lynn Stucky State Representative B. Opposed |
| | 2. 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.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Kronda Thimesch State Representative B. Opposed |
| | 2. 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.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Gary VanDeaver State Representative B. Opposed |
| | 2. 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.) | |

SUBTOTALS - GPAC

| | | |
|---------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| 17 COMMITTEE NAME Associated Republicans of Texas Campaign Fund | | 18 Filer ID (Ethics Commission Filers) 00015555 |
| 19 SCHEDULE SUBTOTALS | | SUBTOTAL AMOUNT |
| | NAME OF SCHEDULE | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 1,566,331.00 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 1,215.77 |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 5. | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 6. | <input checked="" type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ 14,750.00 |
| 7. | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 8. | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 9. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 10. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 2,433,363.17 |
| 11. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 13. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 14. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 15. | <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 4,460.59 |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/22 Rpt: 16/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agee, Forrest <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77030-1122 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) Consultant | | 9 Employer (See Instructions) Self Employed |
| Date 02/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amato, Charles <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216-4459 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Chairman | | Employer (See Instructions) SWBC |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arellano, Adelbert <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260-4334 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Jo Ann <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-4103 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldovin, Donald <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2172 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/22 Rpt: 17/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/02/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beecherl, William | 7 Amount of Contribution (\$) \$5,000.00 |
| | 6 Contributor address; City; State; Zip Code Dallas, TX 75225-6562 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 02/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellinger, John | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78258-4504 | |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) AWI |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergsma, Michael | Amount of Contribution (\$) \$200.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78413-2001 | |
| Principal occupation / Job title (See Instructions) President | | Employer (See Instructions) Msquared Exploration |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billingsley, Lucy | Amount of Contribution (\$) \$10,000.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75201-2588 | |
| Principal occupation / Job title (See Instructions) Partner | | Employer (See Instructions) Billingsley Company |
| Date 02/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Nelda | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code The Woodlands, TX 77380-2402 | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) The Blair Law Firm, PC |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/22 Rpt: 18/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boeker, Travis <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019-3212 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) Investor | | 9 Employer (See Instructions) Self Employed |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonilla, Henry <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205-2680 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) The Normandy Company |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bookout III, John <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-1114 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) President | | Employer (See Instructions) JA Capital |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowling, Randall <hr/> Contributor address; City; State; Zip Code El Paso, TX 79902-2208 | Amount of Contribution (\$) \$10,000.00 |
| Principal occupation / Job title (See Instructions) Home Builder | | Employer (See Instructions) Tropicana Homes |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowling, Robert <hr/> Contributor address; City; State; Zip Code El Paso, TX 79903-3918 | Amount of Contribution (\$) \$10,000.00 |
| Principal occupation / Job title (See Instructions) Home Builder | | Employer (See Instructions) Tropicana Building Corp |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/22 Rpt: 19/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/16/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brisch, Michael <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005-2809 | 7 Amount of Contribution (\$) \$2,000.00 |
| 8 Principal occupation / Job title (See Instructions) Chief Legal and Administrative Officer | | 9 Employer (See Instructions) Perry Homes |
| Date 02/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cain, T. Randall <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212-9493 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, G. Wade <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205-3545 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Caldwell, East and Finlayson PLLC |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canon, Joseph <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605-4937 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Executive VP | | Employer (See Instructions) Tejon Exploration Company |
| Date 02/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, James <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155-5172 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/22 Rpt: 20/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/06/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Elisa <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78258-4156 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Principal occupation / Job title (See Instructions) President | | 9 Employer (See Instructions) Unitech Consulting Engineers, Inc. |
| Date 02/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chester, Brian <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243-5214 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) United Mechanical |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Thomas <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201-7055 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, F.M. Whitley <hr/> Contributor address; City; State; Zip Code Concan, TX 78838-3885 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Leon, Hector <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-3115 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) De Leon & Washburn, P.C. |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/22 Rpt: 21/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/06/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deuell, Robert | 7 Amount of Contribution (\$) \$250.00 |
| 6 Contributor address; City; State; Zip Code Greenville, TX 75402-8019 | | |
| 8 Principal occupation / Job title (See Instructions) Physician | | 9 Employer (See Instructions) Hunt Regional Medical Partners |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Embrey, Walter | Amount of Contribution (\$) \$5,000.00 |
| Contributor address; City; State; Zip Code San Antonio, TX 78209-3274 | | |
| Principal occupation / Job title (See Instructions) Chairman | | Employer (See Instructions) Embrey Development Company |
| Date 02/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enoch, Craig | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Austin, TX 78703-1656 | | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Enoch Kever PLLC |
| Date 02/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epley, Arthur | Amount of Contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code Houston, TX 77027-5220 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Martha | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code Lufkin, TX 75904-7024 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/22 Rpt: 22/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/02/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Favre, Mary <hr/> 6 Contributor address; City; State; Zip Code Sugar Land, TX 77478-1500 | 7 Amount of Contribution (\$) \$2,500.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Ronnie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247-5407 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Anna <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912-7551 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) General Manager | | Employer (See Instructions) Tri-State Electric, Ltd |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Meredith <hr/> Contributor address; City; State; Zip Code Hempstead, TX 77445-8236 | Amount of Contribution (\$) \$375.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goates, James <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762-8427 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/22 Rpt: 23/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/20/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Steve | 7 Amount of Contribution (\$) \$10.00 |
| 6 Contributor address; City; State; Zip Code San Angelo, TX 76904-0704 | | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadley, Kenneth | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Wichita Falls, TX 76310 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Cynthia | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Lubbock, TX 79423-0849 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hancock Jr., James | Amount of Contribution (\$) \$56.00 |
| Contributor address; City; State; Zip Code Meadows Place, TX 77477-1610 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatfield, H. Harris | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code El Paso, TX 79912-1942 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/22 Rpt: 24/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/06/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hite, Gregory <hr/> 6 Contributor address; City; State; Zip Code Fischer, TX 78623-1891 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Ned <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-5837 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Chairman/CEO | | Employer (See Instructions) Ned S. Holmes Investments |
| Date 02/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hook, Joanne <hr/> Contributor address; City; State; Zip Code Houston, TX 77025-3347 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houghton, William <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381-4540 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huizar, Henry <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78225-1932 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/22 Rpt: 25/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/06/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Raymond <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75201-2300 | 7 Amount of Contribution (\$) \$150,000.00 |
| 8 Principal occupation / Job title (See Instructions) CEO | | 9 Employer (See Instructions) Hunt Consolidated Inc |
| Date 02/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Woody <hr/> Contributor address; City; State; Zip Code El Paso, TX 79913-0667 | Amount of Contribution (\$) \$15,000.00 |
| Principal occupation / Job title (See Instructions) Senior Chairman of the Board | | Employer (See Instructions) Hunt Companies |
| Date 02/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Woody <hr/> Contributor address; City; State; Zip Code El Paso, TX 79913-0667 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) Senior Chairman of the Board | | Employer (See Instructions) Hunt Companies |
| Date 02/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J.L. Glass Ranch <hr/> Contributor address; City; State; Zip Code Big Spring, TX 79720-7933 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Fred <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762-8427 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Atkins, Hollman, Jones, Peacock, Lewis & Lyons |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/22 Rpt: 26/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly Jr., Dee | 7 Amount of Contribution (\$) \$5,000.00 |
| | 6 Contributor address; City; State; Zip Code Fort Worth, TX 76107-3507 | |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) Kelly Hart & Hallman |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy III, Paul | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78413-2734 | |
| Principal occupation / Job title (See Instructions) Pediatric Dentist | | Employer (See Instructions) Kennedy Dental Care |
| Date 02/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinder, David | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77057-1319 | |
| Principal occupation / Job title (See Instructions) President | | Employer (See Instructions) CGK Holdings |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krier, Cyndi | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78216-2187 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowry, Jerry | Amount of Contribution (\$) \$53.00 |
| | Contributor address; City; State; Zip Code Waco, TX 76712-2318 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/22 Rpt: 27/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/05/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDonald, T. Justin <hr/> 6 Contributor address; City; State; Zip Code Kerrville, TX 78028-4019 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Principal occupation / Job title (See Instructions) CEO | | 9 Employer (See Instructions) MacDonald Companies |
| Date 02/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahomes Jr., William <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-3201 | Amount of Contribution (\$) \$700.00 |
| Principal occupation / Job title (See Instructions) Attorney/Of Counsel | | Employer (See Instructions) Bracewell |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mays, Mark <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Rocking M Capital |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNamara, Daniel <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78253-5062 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Info Requested (under \$110) | | Employer (See Instructions) Info Requested (under \$110) |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, Samuel <hr/> Contributor address; City; State; Zip Code Lamesa, TX 79331-2205 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Farmer | | Employer (See Instructions) Self Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 13/22 Rpt: 28/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 01/31/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murchison, Maggie <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75229-6604 | 7 Amount of Contribution (\$) \$5.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murchison, Maggie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-6604 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nau III, John <hr/> Contributor address; City; State; Zip Code Houston, TX 77219-0130 | Amount of Contribution (\$) \$450,000.00 |
| Principal occupation / Job title (See Instructions) Chairman/CEO | | Employer (See Instructions) Silver Eagle Beverages |
| Date 02/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neeley, Rhejeanne <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-3116 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Madaleina <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501-1114 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 14/22 Rpt: 29/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/06/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Otten, Doug <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75287-7555 | 7 Amount of Contribution (\$) \$200.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Margaret <hr/> Contributor address; City; State; Zip Code Tyler, TX 75711-7640 | Amount of Contribution (\$) \$15,000.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Citizens 1st Bank |
| Date 02/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Propes, Jay <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-1767 | Amount of Contribution (\$) \$1.00 |
| Principal occupation / Job title (See Instructions) Partner | | Employer (See Instructions) Mercury LLC |
| Date 02/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Propes, Jay <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-1767 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Partner | | Employer (See Instructions) Mercury LLC |
| Date 01/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rath, Diane <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-1899 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 15/22 Rpt: 30/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Repal, Georgana <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77018-1311 | 7 Amount of Contribution (\$) \$30.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 02/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Republican State Leadership Committee Grassroots Account <hr/> Contributor address; City; State; Zip Code Washington, DC 20004-1218 | Amount of Contribution (\$) \$750,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Gary <hr/> Contributor address; City; State; Zip Code Euless, TX 76039-0370 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Road Construction | | Employer (See Instructions) Reynolds Asphalt & Contruction Co. |
| Date 02/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Pat <hr/> Contributor address; City; State; Zip Code Austin, TX 78717-3875 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Wilhelmina <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-2120 | Amount of Contribution (\$) \$10,000.00 |
| Principal occupation / Job title (See Instructions) Investor | | Employer (See Instructions) Cockspur Inc. |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 16/22 Rpt: 31/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Ryan <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205-1650 | 7 Amount of Contribution (\$) \$10,000.00 |
| 8 Principal occupation / Job title (See Instructions) CEO | | 9 Employer (See Instructions) Mary Kay Inc. |
| Date 02/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rupani, Nasruddin <hr/> Contributor address; City; State; Zip Code Houston, TX 77036-5027 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) President | | Employer (See Instructions) World's Gold Diamonds |
| Date 02/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sartain, Charles <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-2823 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Gray Reed |
| Date 02/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwierzke Jr., Hilmer <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418-5356 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sewell, Carl <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-8123 | Amount of Contribution (\$) \$25,000.00 |
| Principal occupation / Job title (See Instructions) Chairman | | Employer (See Instructions) Sewell Automotive Companies |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|-----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 17/22 Rpt: 32/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/07/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, Benjamin <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205-5425 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) Real Estate | | 9 Employer (See Instructions) Bleecker Partners |
| Date 02/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sivalls, C. Richard <hr/> Contributor address; City; State; Zip Code Odessa, TX 79768-4667 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) President | | Employer (See Instructions) Sivalls, Inc. |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Ronnie <hr/> Contributor address; City; State; Zip Code Richmond, TX 77407-7787 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Upstream Engineering |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Thomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-2329 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steinberger, John <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912-4919 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|-------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 18/22 Rpt: 33/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 01/29/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, John <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225-2321 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steres, Dianna <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384-4795 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teter, Rex <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77503-1428 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Margo Living Trust <hr/> Contributor address; City; State; Zip Code El Paso, TX 79922-1051 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson Jr., Charles <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501-4815 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Self Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|-----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 19/22 Rpt: 34/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/16/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) True, Bruce | 7 Amount of Contribution (\$) \$10.00 |
| 6 Contributor address; City; State; Zip Code Copperas Cove, TX 76522-6246 | | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 02/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Twichell, C. Scott | Amount of Contribution (\$) \$150.00 |
| Contributor address; City; State; Zip Code Austin, TX 78734-1023 | | |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Twichell Holdings LLC |
| Date 02/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valero Energy Corporation PAC | Amount of Contribution (\$) \$5,000.00 |
| Contributor address; City; State; Zip Code San Antonio, TX 78269-6000 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wall, Vivekananda | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code Odessa, TX 79762-8416 | | |
| Principal occupation / Job title (See Instructions) Homemaker | | Employer (See Instructions) Self Employed |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ware, Richard | Amount of Contribution (\$) \$1,000.00 |
| Contributor address; City; State; Zip Code Amarillo, TX 79105-0001 | | |
| Principal occupation / Job title (See Instructions) Banker | | Employer (See Instructions) Amarillo National Bank |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|-----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 20/22 Rpt: 35/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/05/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Laura <hr/> 6 Contributor address; City; State; Zip Code McAllen, TX 78501-5028 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Principal occupation / Job title (See Instructions) Owner | | 9 Employer (See Instructions) The Warren Group Architects |
| Date 02/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wieser, Alicia <hr/> Contributor address; City; State; Zip Code Westport, CT 06880-6507 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Betty <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-2418 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson Jr., Herman <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-6033 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Services Inc |
| Date 02/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winland, Mark <hr/> Contributor address; City; State; Zip Code Houston, TX 77059-5521 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 21/22 Rpt: 36/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/14/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winland, Mark <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77059-5521 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 02/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodard Hall, Shea <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodcock, James <hr/> Contributor address; City; State; Zip Code Midland, TX 79705-8626 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) Real Estate | | Employer (See Instructions) Self Employed |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthington, John <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259-2377 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamora, Denyse <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051-4552 | Amount of Contribution (\$) \$15.00 |
| Principal occupation / Job title (See Instructions) Real Estate Sales | | Employer (See Instructions) Self Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

| | | |
|-------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 22/22 Rpt: 37/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zoch, Marion <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209-6457 | 7 Amount of Contribution (\$) \$3,750.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 1/1 Rpt: 38/114 | |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 01/31/2024 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Jeanne | 8 Amount of contribution (\$) \$240.85 | 9 In-kind contribution description Event food/beverage catering |
| | 7 Contributor address; City; State; Zip Code Dallas, TX 75205-3716 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Volunteer | | 11 Employer (FOR NON-JUDICIAL) (See instructions) Self Employed | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 02/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nau III, John | Amount of contribution (\$) \$974.92 | In-kind contribution description Event food/beverage catering |
| | Contributor address; City; State; Zip Code Houston, TX 77219-0130 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Chairman/CEO | | Employer (FOR NON-JUDICIAL) (See instructions) Silver Eagle Beverages | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

| | | |
|----------------------------------------------------------------------|--------------------------------------------------------------------------------|-----------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule C3: Sch: 1/1 Rpt: 39/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/06/2024 | 5 Corporation / Labor Organization name 20/20 Vision Care | 6 Amount (\$) 1,250.00 |
| Date 02/14/2024 | Corporation / Labor Organization name Howard Midstream Energy Partners, LLC | Amount (\$) 5,000.00 |
| Date 02/19/2024 | Corporation / Labor Organization name Lodge Lumber Co., Inc. | Amount (\$) 1,000.00 |
| Date 01/29/2024 | Corporation / Labor Organization name MoakCasey, LLC | Amount (\$) 2,500.00 |
| Date 02/06/2024 | Corporation / Labor Organization name Unintech Consulting Engineers, Inc. | Amount (\$) 5,000.00 |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 1/73 Rpt: 40/114 | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
|------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|

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|-----------------------------|----------------------------------------|
| 4 Date 02/08/2024 | 5 Payee name 1303 Properties |
|-----------------------------|----------------------------------------|

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|------------------------------------|------------------------------------------------------------------------------------------------------|
| 6 Amount (\$) \$2,690.00 | 7 Payee address; City; State; Zip Code 807 Brazos St Ste 1010 Austin, TX 78701-2508 |
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Expenditure from corporate funds

| | | |
|---------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking and Rent |
|---------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|---------------------------------------------------------------------|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---------------------------------------------------------------------|-----------------------------|---------------|-------------|

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|--------------------|-------------------------|
| Date 02/08/2024 | Payee name 936 Media |
|--------------------|-------------------------|

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|---------------------------|----------------------------------------------------------------------------------------------------------------|
| Amount (\$) \$8,000.00 | Payee address; City; State; Zip Code 1050 Johnnie Dodds Blvd Unit 2414 Mount Pleasant, SC 29464-9995 |
|---------------------------|----------------------------------------------------------------------------------------------------------------|

Expenditure from corporate funds

| | | |
|---------------------------------|------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Video Production |
|---------------------------------|------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| | | | |
|------------------------------------------------------------|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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|--------------------|--------------------|
| Date 01/26/2024 | Payee name AT&T |
|--------------------|--------------------|

| | |
|-------------------------|-------------------------------------------------------------------------------------|
| Amount (\$) \$138.67 | Payee address; City; State; Zip Code PO Box 105414 Atlanta, GA 30348-5414 |
|-------------------------|-------------------------------------------------------------------------------------|

Expenditure from corporate funds

| | | |
|---------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications |
|---------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|------------------------------------------------------------|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 2/73 Rpt: 41/114 | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| | |
|-----------------------------|-----------------------------|
| 4 Date 02/12/2024 | 5 Payee name AT&T |
|-----------------------------|-----------------------------|

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|----------------------------------|----------------------------------------------------------------------------------------------|
| 6 Amount (\$) \$209.14 | 7 Payee address; City; State; Zip Code PO Box 105414 Atlanta, GA 30348-5414 |
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Expenditure from corporate funds

| | | |
|---------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications |
|---------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|--------------------------------------------------------------|-----------------------------|---------------|-------------|
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--------------------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/20/2024 | Payee name Allyn Political LLC |
|--------------------|-----------------------------------|

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|----------------------------|------------------------------------------------------------------------------------------------|
| Amount (\$) \$25,000.00 | Payee address; City; State; Zip Code 3838 Oak Lawn Ave Ste 400 Dallas, TX 75219-4506 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
|-------------------------------|------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| | | | |
|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

| | |
|--------------------|----------------------|
| Date 02/15/2024 | Payee name Amazon |
|--------------------|----------------------|

| | |
|------------------------|---------------------------------------------------------------------------------------|
| Amount (\$) \$59.42 | Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109-5210 |
|------------------------|---------------------------------------------------------------------------------------|

Expenditure from corporate funds

| | | |
|-------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
|-------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 3/73 Rpt: 42/114 | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
|------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|

| | |
|-----------------------------|------------------------------------------|
| 4 Date 02/19/2024 | 5 Payee name American Airlines |
|-----------------------------|------------------------------------------|

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|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| 6 Amount (\$) \$246.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 619616 Dallas, TX 75261-9616 |
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|---------------------------------|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight to attend political reception |
|---------------------------------|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|--------------------------------------------------------------|-----------------------------|---------------|-------------|
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--------------------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/02/2024 | Payee name Austin American Statesman |
|--------------------|-----------------------------------------|

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| Amount (\$) \$15.80 <input checked="" type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 305 S Congress Ave Austin, TX 78704-1200 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription |
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|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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|--------------------|------------------------------------------------------|
| Date 01/29/2024 | Payee name Austin-Bergstrom International Airport |
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| Amount (\$) \$58.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3600 Presidential Blvd Austin, TX 78719-2363 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking |
|-------------------------------|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | | | | |
|----------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|-----------------------------|---------------|
| 1 Total pages Schedule F1: Sch: 4/73 Rpt: 43/114 | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 | | | |
| 4 Date 01/31/2024 | 5 Payee name Blue Cross Blue Shield of Texas | | | | |
| 6 Amount (\$) \$362.85 | 7 Payee address; City; State; Zip Code Po Box 650615 Dallas, TX 75265-0615 | | | | |
| <input checked="" type="checkbox"/> Expenditure from corporate funds | | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Employee Health Insurance | | | |
| | <table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table> | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held | | |
| Date 01/31/2024 | Payee name Blue Cross Blue Shield of Texas | | | | |
| Amount (\$) \$1,142.07 | Payee address; City; State; Zip Code Po Box 650615 Dallas, TX 75265-0615 | | | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Employee Health Insurance | | | |
| | <table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table> | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held | | |
| Date 02/02/2024 | Payee name Brasserie 19 | | | | |
| Amount (\$) \$5.00 | Payee address; City; State; Zip Code 1962 W Gray St Houston, TX 77019-4816 | | | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking | | | |
| | <table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table> | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held | | |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 5/73 Rpt: 44/114 | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 01/31/2024 | 5 Payee name Buc-ee's | |
| 6 Amount (\$) \$25.98 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 327 Farm To Market Rd 2004 Lake Jackson, TX 77566 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/22/2024 | Payee name Buc-ee's | |
| Amount (\$) \$19.95 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 27700 Katy Fwy Katy, TX 77494-1082 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/09/2024 | Payee name Bullhorn Communications | |
| Amount (\$) \$29,155.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 5016 Webster St Omaha, NE 68132-2210 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 6/73 Rpt: 45/114 | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 01/31/2024 | 5 Payee name Bush, William | |
| 6 Amount (\$) \$2,083.34 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/19/2024 | Payee name Bush, William | |
| Amount (\$) \$422.10 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage at \$.67 per mile 2/19/24-2/22/24 |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/21/2024 | Payee name Carmela's Mexican Restaurant | |
| Amount (\$) \$17.54 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3925 Calder Ave Beaumont, TX 77706-4923 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 7/73 Rpt: 46/114 | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 01/26/2024 | 5 Payee name ClickUp |
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| 6 Amount (\$) \$81.02 | 7 Payee address; City; State; Zip Code 363 5Th Ave Ste 300 San Diego, CA 92101-7081 |
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Expenditure from corporate funds

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Computer Software Service |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Convert Digital LLC |
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| Amount (\$) \$8,243.00 | Payee address; City; State; Zip Code 1010 N Fairfax St Fl 2 Alexandria, VA 22314 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Fundraising |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/12/2024 | Payee name Convert Digital LLC |
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| Amount (\$) \$5,354.45 | Payee address; City; State; Zip Code 1010 N Fairfax St Fl 2 Alexandria, VA 22314 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Consulting Services |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 8/73 Rpt: 47/114 | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/12/2024 | 5 Payee name Cothran, Kathy |
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| 6 Amount (\$) \$255.00 | 7 Payee address; City; State; Zip Code 1109 Bit Ln Cedar Park, TX 78613-1486 |
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Expenditure from corporate funds

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Services |
|---------------------------------|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/08/2024 | Payee name Dallas Morning News |
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| Amount (\$) \$28.10 | Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109-5210 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription |
|-------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 01/29/2024 | Payee name DoorDash |
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| Amount (\$) \$133.05 | Payee address; City; State; Zip Code 303 2Nd St San Francisco, CA 94107-1366 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals |
|-------------------------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 9/73 Rpt: 48/114 | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/20/2024 | 5 Payee name DoorDash |
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| 6 Amount (\$) \$37.77 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 303 2Nd St San Francisco, CA 94107-1366 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--------------------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/01/2024 | Payee name Dropbox |
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| Amount (\$) \$223.86 <input checked="" type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1800 Owens St San Francisco, CA 94158-2381 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online File Storage |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/21/2024 | Payee name Eunice |
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| Amount (\$) \$375.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3737 Buffalo Speedway Ste 100 Houston, TX 77098-3747 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Event Room Rental |
|-------------------------------|------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 10/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
|------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|

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| 4 Date 02/12/2024 | 5 Payee name Farrell Gjesdal Strategy Group |
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| 6 Amount (\$) \$29,151.60 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 4040 State Highway 6 S Ste 200 College Station, TX 77845-8902 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--------------------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/01/2024 | Payee name FedEx Office |
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| Amount (\$) \$26.78 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 327 Congress Ave Ste 100 Austin, TX 78701-3691 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Postage |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/08/2024 | Payee name Fidi Media LLC |
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| Amount (\$) \$25,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 180 Water St Apt 416 New York, NY 10038-5364 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
|-------------------------------|------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 11/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/12/2024 | 5 Payee name Fidi Media LLC |
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| 6 Amount (\$) \$80,075.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 180 Water St Apt 416 New York, NY 10038-5364 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
|---------------------------------|------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/23/2024 | Payee name Flipsnack |
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| Amount (\$) \$48.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 535 Mission St Fl 14 San Francisco, CA 94105-3253 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design Software |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/12/2024 | Payee name Frost Bank |
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| Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 100 West Houston Street San Antonio, TX 78205-1414 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 12/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/12/2024 | 5 Payee name Frost Bank |
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| 6 Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 100 West Houston Street San Antonio, TX 78205-1414 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee |
|---------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/09/2024 | Payee name Frost Bank |
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| Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 100 West Houston Street San Antonio, TX 78205-1414 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee |
|------------------------|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/02/2024 | Payee name Frost Bank |
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| Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 100 West Houston Street San Antonio, TX 78205-1414 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee |
|------------------------|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|------------------------------------------------------------|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 13/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/01/2024 | 5 Payee name Frost Bank | |
| 6 Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 100 West Houston Street San Antonio, TX 78205-1414 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/01/2024 | Payee name Frost Bank | |
| Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 100 West Houston Street San Antonio, TX 78205-1414 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/29/2024 | Payee name Frost Bank | |
| Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 100 West Houston Street San Antonio, TX 78205-1414 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 14/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 | | | |
| 4 Date 01/31/2024 | 5 Payee name Frost Bank | | | | |
| 6 Amount (\$) \$5.00 | 7 Payee address; City; State; Zip Code 100 West Houston Street San Antonio, TX 78205-1414 | | | | |
| <input checked="" type="checkbox"/> Expenditure from corporate funds | | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee | | | |
| | <table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table> | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held | | |
| Date 02/20/2024 | Payee name Frost Bank | | | | |
| Amount (\$) \$30.00 | Payee address; City; State; Zip Code 100 West Houston Street San Antonio, TX 78205-1414 | | | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee | | | |
| | <table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table> | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held | | |
| Date 02/20/2024 | Payee name Frost Bank | | | | |
| Amount (\$) \$30.00 | Payee address; City; State; Zip Code 100 West Houston Street San Antonio, TX 78205-1414 | | | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee | | | |
| | <table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table> | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held | | |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 15/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/20/2024 | 5 Payee name Frost Bank |
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| 6 Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 100 West Houston Street San Antonio, TX 78205-1414 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee |
|---------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 01/31/2024 | Payee name Fulton, Alexander R. |
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| Amount (\$) \$8,333.33 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll |
|-------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 01/26/2024 | Payee name HSA Bank |
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| Amount (\$) \$1.75 <input checked="" type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 939 Sheboygan, WI 53082-0939 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Account Maintenance Fee |
|-------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 16/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 01/30/2024 | 5 Payee name HSA Bank |
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| 6 Amount (\$) \$73.31 | 7 Payee address; City; State; Zip Code Po Box 939 Sheboygan, WI 53082-0939 |
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Expenditure from corporate funds

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Employee HSA Contributions |
|---------------------------------|----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--------------------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 01/30/2024 | Payee name HSA Bank |
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| Amount (\$) \$122.19 | Payee address; City; State; Zip Code Po Box 939 Sheboygan, WI 53082-0939 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Employee HSA Contributions |
|------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/08/2024 | Payee name Hill Country Springs |
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|------------------------|------------------------------------------------------------------------------------|
| Amount (\$) \$38.57 | Payee address; City; State; Zip Code PO Box 2220 Manchaca, TX 78652-2220 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
|------------------------|----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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|----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 17/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/17/2024 | 5 Payee name Houston Chronicle | |
| 6 Amount (\$) \$19.96 | 7 Payee address; City; State; Zip Code 4747 Southwest Fwy Houston, TX 77027-6901 | |
| <input checked="" type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/08/2024 | Candidate/Officeholder name JRP Advisory | |
| Amount (\$) \$1,136.63 | Office sought 2288 Savannah Ln | |
| <input checked="" type="checkbox"/> Expenditure from corporate funds | Office held Lexington, KY 40513-1749 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Board Meeting Briefing Books |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/19/2024 | Candidate/Officeholder name Jonathan's the Rub | |
| Amount (\$) \$118.51 | Office sought 9090 Katy Fwy | |
| <input type="checkbox"/> Expenditure from corporate funds | Office held Houston, TX 77024-1695 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 18/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/13/2024 | 5 Payee name Jordan, Anne | |
| 6 Amount (\$) \$97.82 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage at \$.67 per mile |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/31/2024 | Payee name Jordan, Anne | |
| Amount (\$) \$2,958.34 <input checked="" type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Administrative Payroll |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/31/2024 | Payee name Jordan, Anne | |
| Amount (\$) \$2,958.33 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 19/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/22/2024 | 5 Payee name KC Strategies, LLC | |
| 6 Amount (\$) \$15,216.02 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/22/2024 | Payee name KC Strategies, LLC | |
| Amount (\$) \$23,957.74 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/22/2024 | Payee name KC Strategies, LLC | |
| Amount (\$) \$10,079.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Text Messaging |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 20/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/01/2024 | 5 Payee name KC Strategies. LLC |
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| 6 Amount (\$) \$35,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/01/2024 | Payee name KC Strategies. LLC |
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| Amount (\$) \$45,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/01/2024 | Payee name KC Strategies. LLC |
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| Amount (\$) \$56,041.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 21/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/02/2024 | 5 Payee name KC Strategies. LLC |
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| 6 Amount (\$) \$35,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/08/2024 | Payee name KC Strategies. LLC |
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| Amount (\$) \$4,491.84 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/08/2024 | Payee name KC Strategies. LLC |
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| Amount (\$) \$2,177.02 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 22/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/08/2024 | 5 Payee name KC Strategies. LLC | |
| 6 Amount (\$) \$15,208.85 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/19/2024 | Payee name KC Strategies. LLC | |
| Amount (\$) \$3,039.25 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Yard Signs |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/19/2024 | Payee name KC Strategies. LLC | |
| Amount (\$) \$26,320.50 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Canvassing |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 23/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/19/2024 | 5 Payee name KC Strategies. LLC | |
| 6 Amount (\$) \$5,222.10 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Text Messaging |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/19/2024 | Payee name KC Strategies. LLC | |
| Amount (\$) \$40,628.50 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Canvassing |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/19/2024 | Payee name KC Strategies. LLC | |
| Amount (\$) \$9,325.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Text Messaging |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 24/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/19/2024 | 5 Payee name KC Strategies. LLC |
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| 6 Amount (\$) \$15,599.77 | 7 Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 |
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Expenditure from corporate funds

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/19/2024 | Payee name KC Strategies. LLC |
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| Amount (\$) \$9,300.00 | Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Canvassing |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/19/2024 | Payee name KC Strategies. LLC |
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| Amount (\$) \$16,768.00 | Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Canvassing |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 25/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/19/2024 | 5 Payee name KC Strategies. LLC | |
| 6 Amount (\$) \$24,613.21 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/19/2024 | Payee name KC Strategies. LLC | |
| Amount (\$) \$8,002.02 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/22/2024 | Payee name KC Strategies. LLC | |
| Amount (\$) \$13,792.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Canvassing |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 26/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/22/2024 | 5 Payee name KC Strategies. LLC |
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| 6 Amount (\$) \$5,408.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Text Messaging |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/22/2024 | Payee name KC Strategies. LLC |
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| Amount (\$) \$25,465.17 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/08/2024 | Payee name Keel Systems LLC |
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| Amount (\$) \$599.75 <input checked="" type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 23812 Tres Coronas Spicewood, TX 78669-1631 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance Accounting Expense |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 27/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/22/2024 | 5 Payee name LHP + Company, Inc. |
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| 6 Amount (\$) \$3,750.00 | 7 Payee address; City; State; Zip Code PO Box 29382 Austin, TX 78755-6382 |
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Expenditure from corporate funds

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supervision Services |
|---------------------------------|----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/22/2024 | Payee name LHP + Company, Inc. |
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| Amount (\$) \$3,750.00 | Payee address; City; State; Zip Code PO Box 29382 Austin, TX 78755-6382 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Consulting Services |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/16/2024 | Payee name Lawson Strategies, LLC |
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| Amount (\$) \$13,000.00 | Payee address; City; State; Zip Code Po Box 782 Austin, TX 78767-0782 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
|-------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 28/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 01/30/2024 | 5 Payee name Leon Strategies | |
| 6 Amount (\$) \$10,493.94 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Text Messaging |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held | |
| Date 02/01/2024 | Payee name Leon Strategies | |
| Amount (\$) \$6,446.68 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| | Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held | |
| Date 02/02/2024 | Payee name Leon Strategies | |
| Amount (\$) \$14,791.15 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| | Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held | |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 29/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/02/2024 | 5 Payee name Leon Strategies |
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| 6 Amount (\$) \$15,928.03 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
|---------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|--------------------------------------------------------------|-----------------------------|---------------|-------------|
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--------------------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/02/2024 | Payee name Leon Strategies |
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| Amount (\$) \$15,398.16 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
|------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/02/2024 | Payee name Leon Strategies |
|--------------------|-------------------------------|

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|---------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| Amount (\$) \$14,804.66 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
|------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 30/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/02/2024 | 5 Payee name Leon Strategies | |
| 6 Amount (\$) \$16,781.98 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/02/2024 | Candidate/Officeholder name Leon Strategies | |
| Amount (\$) \$20,323.92 <input type="checkbox"/> Expenditure from corporate funds | Office sought 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/02/2024 | Candidate/Officeholder name Leon Strategies | |
| Amount (\$) \$1,417.14 <input type="checkbox"/> Expenditure from corporate funds | Office sought 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Text Messaging |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 31/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/05/2024 | 5 Payee name Leon Strategies | |
| 6 Amount (\$) \$2,865.41 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/06/2024 | Payee name Leon Strategies | |
| Amount (\$) \$112.97 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/07/2024 | Payee name Leon Strategies | |
| Amount (\$) \$24,710.70 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 32/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/14/2024 | 5 Payee name Leon Strategies | |
| 6 Amount (\$) \$12,355.35 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/14/2024 | Payee name Leon Strategies | |
| Amount (\$) \$25,945.02 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/14/2024 | Payee name Leon Strategies | |
| Amount (\$) \$36,677.76 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 33/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/12/2024 | 5 Payee name Leon Strategies |
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| 6 Amount (\$) \$14,506.67 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
|---------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|--------------------------------------------------------------|-----------------------------|---------------|-------------|
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--------------------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/12/2024 | Payee name Leon Strategies |
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|---------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| Amount (\$) \$28,477.56 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
|------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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|--------------------|-------------------------------|
| Date 02/12/2024 | Payee name Leon Strategies |
|--------------------|-------------------------------|

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|--------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| Amount (\$) \$2,459.88 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 |
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|------------------------|-----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Text Messaging |
|------------------------|-----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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|------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 34/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/16/2024 | 5 Payee name Leon Strategies | |
| 6 Amount (\$) \$28,213.61 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/20/2024 | Candidate/Officeholder name Leon Strategies | |
| Amount (\$) \$25,676.88 <input type="checkbox"/> Expenditure from corporate funds | Office sought 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Office held | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/21/2024 | Candidate/Officeholder name Leon Strategies | |
| Amount (\$) \$11,222.02 <input type="checkbox"/> Expenditure from corporate funds | Office sought 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Office held | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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|------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 35/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/21/2024 | 5 Payee name Leon Strategies | |
| 6 Amount (\$) \$11,222.02 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/22/2024 | Payee name Leon Strategies | |
| Amount (\$) \$20,986.20 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Text Messaging |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/23/2024 | Payee name Leon Strategies | |
| Amount (\$) \$42,855.52 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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|------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 36/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/23/2024 | 5 Payee name Leon Strategies | |
| 6 Amount (\$) \$51,111.28 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/23/2024 | Payee name Leon Strategies | |
| Amount (\$) \$38,480.92 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/23/2024 | Payee name Leon Strategies | |
| Amount (\$) \$34,730.20 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 37/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
|------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|

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| 4 Date 02/23/2024 | 5 Payee name Leon Strategies |
|-----------------------------|----------------------------------------|

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| 6 Amount (\$) \$38,502.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 |
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|---------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
|---------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/23/2024 | Payee name Leon Strategies |
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| Amount (\$) \$5,611.01 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470 |
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|------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
|------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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|--------------------|--------------------|
| Date 01/29/2024 | Payee name Lyft |
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| Amount (\$) \$36.69 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 548 Market St San Francisco, CA 94104-5401 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel Out of District | (b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ground Transportation |
|------------------------|--------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|------------------------------------------------------------|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 38/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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|-----------------------------|-------------------------------------------------|
| 4 Date 02/12/2024 | 5 Payee name Majority Strategies, LLC |
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| 6 Amount (\$) \$16,867.50 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 679219 Dallas, TX 75267-9219 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
|---------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---------------------------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/16/2024 | Payee name Mano DeAyala Campaign |
|--------------------|-------------------------------------|

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| Amount (\$) \$6,200.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 12335 Kingsride Ln # 416 Houston, TX 77024-4141 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution |
|-------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|------------------------------------------------------------|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 01/30/2024 | Payee name McWright, Jamie |
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| Amount (\$) \$139.36 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage at \$.67 per mile |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 39/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/01/2024 | 5 Payee name McWright, Jamie |
|-----------------------------|----------------------------------------|

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| 6 Amount (\$) \$180.90 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage at \$.67 per mile |
|---------------------------------|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name McWright, Jamie |
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| Amount (\$) \$105.19 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage at \$.67 per mile |
|-------------------------------|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 01/31/2024 | Payee name McWright, Jamie |
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| Amount (\$) \$5,781.25 <input checked="" type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Management Payroll |
|-------------------------------|----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|------------------------------------------------------------|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 40/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 01/31/2024 | 5 Payee name McWright, Jamie | |
| 6 Amount (\$) \$17,343.75 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/30/2024 | Payee name Mesero | |
| Amount (\$) \$83.26 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 5330 W Lovers Ln Ste 112B Dallas, TX 75209-4258 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/08/2024 | Payee name Microsoft | |
| Amount (\$) \$75.76 <input checked="" type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052-8300 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 41/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
|------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|

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| 4 Date 02/01/2024 | 5 Payee name Microsoft |
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| 6 Amount (\$) \$75.76 | 7 Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052-8300 |
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Expenditure from corporate funds

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|---------------------------------|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software |
|---------------------------------|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|--------------------------------------------------------------|-----------------------------|---------------|-------------|
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--------------------------------------------------------------|-----------------------------|---------------|-------------|

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|--------------------|-------------------------|
| Date 02/12/2024 | Payee name Microsoft |
|--------------------|-------------------------|

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| Amount (\$) \$13.54 | Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052-8300 |
|------------------------|-------------------------------------------------------------------------------------|

Expenditure from corporate funds

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|-------------------------------|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software |
|-------------------------------|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| | | | |
|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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|--------------------|-----------------------------|
| Date 02/01/2024 | Payee name Murphy Nasica |
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| Amount (\$) \$20,656.29 | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
|-------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 42/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/01/2024 | 5 Payee name Murphy Nasica | |
| 6 Amount (\$) \$15,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Canvassing |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/01/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$23,876.89 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/01/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$18,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 43/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/01/2024 | 5 Payee name Murphy Nasica | |
| 6 Amount (\$) \$900.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Polling and Research |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/01/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$12,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/01/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$5,163.41 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Yard Signs |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 44/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/01/2024 | 5 Payee name Murphy Nasica | |
| 6 Amount (\$) \$30,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Canvassing |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/01/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$15,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Canvassing |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/01/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$18,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 45/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/01/2024 | 5 Payee name Murphy Nasica | |
| 6 Amount (\$) \$26,242.81 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/01/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$15,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Newspaper Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/01/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$3,816.53 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Yard Signs |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 46/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/01/2024 | 5 Payee name Murphy Nasica | |
| 6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Polling and Research |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/07/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$23,636.13 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/07/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$20,656.29 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 47/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/07/2024 | 5 Payee name Murphy Nasica | |
| 6 Amount (\$) \$24,246.77 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/07/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$26,506.59 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/07/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$23,318.60 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 48/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/07/2024 | 5 Payee name Murphy Nasica |
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| 6 Amount (\$) \$24,576.46 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/07/2024 | Payee name Murphy Nasica |
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| Amount (\$) \$26,070.10 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/07/2024 | Payee name Murphy Nasica |
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| Amount (\$) \$27,518.16 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
|------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 49/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/07/2024 | 5 Payee name Murphy Nasica |
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| 6 Amount (\$) \$22,630.29 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
|---------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|--------------------------------------------------------------|-----------------------------|---------------|-------------|
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/07/2024 | Payee name Murphy Nasica |
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| Amount (\$) \$21,414.57 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/07/2024 | Payee name Murphy Nasica |
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| Amount (\$) \$21,097.90 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
|------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 50/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/08/2024 | 5 Payee name Murphy Nasica | |
| 6 Amount (\$) \$3,258.87 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Polling and Research |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/19/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$18,687.42 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/19/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$6,023.54 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 51/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/19/2024 | 5 Payee name Murphy Nasica | |
| 6 Amount (\$) \$22,369.71 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/19/2024 | Candidate/Officeholder name Murphy Nasica | |
| Amount (\$) \$3,804.53 <input type="checkbox"/> Expenditure from corporate funds | Office sought Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/19/2024 | Candidate/Officeholder name Murphy Nasica | |
| Amount (\$) \$27,500.00 <input type="checkbox"/> Expenditure from corporate funds | Office sought Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/19/2024 | Candidate/Officeholder name Murphy Nasica | |
| Amount (\$) \$27,500.00 <input type="checkbox"/> Expenditure from corporate funds | Office sought Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 52/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/19/2024 | 5 Payee name Murphy Nasica | |
| 6 Amount (\$) \$14,981.84 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/19/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$5,429.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/19/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$72,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 53/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/19/2024 | 5 Payee name Murphy Nasica | |
| 6 Amount (\$) \$12,468.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/19/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$30,150.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/19/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$17,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 54/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/19/2024 | 5 Payee name Murphy Nasica |
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|------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| 6 Amount (\$) \$17,243.18 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/19/2024 | Payee name Murphy Nasica |
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| Amount (\$) \$19,095.20 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
|------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/19/2024 | Payee name Murphy Nasica |
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| Amount (\$) \$23,079.02 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 55/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/19/2024 | 5 Payee name Murphy Nasica | |
| 6 Amount (\$) \$23,079.02 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/19/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$23,876.89 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/19/2024 | Payee name Murphy Nasica | |
| Amount (\$) \$24,207.05 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 56/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/19/2024 | 5 Payee name Murphy Nasica |
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| 6 Amount (\$) \$15,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Newspaper Advertising |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/19/2024 | Payee name Murphy Nasica |
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| Amount (\$) \$14,953.13 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Newspaper Advertising |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/19/2024 | Payee name Murphy Nasica |
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| Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 |
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|------------------------|-------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Polling and Research |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 57/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/19/2024 | 5 Payee name Murphy Nasica |
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| 6 Amount (\$) \$11,223.96 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Canvassing |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--------------------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/19/2024 | Payee name Murphy Nasica |
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| Amount (\$) \$27,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Radio Advertising |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 01/29/2024 | Payee name Neumann & Company |
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| Amount (\$) \$21,237.14 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 5417 Pine St Bellaire, TX 77401-4706 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 58/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 01/29/2024 | 5 Payee name Neumann & Company |
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| 6 Amount (\$) \$14,618.40 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 5417 Pine St Bellaire, TX 77401-4706 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/05/2024 | Payee name Neumann & Company |
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| Amount (\$) \$12,994.84 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 5417 Pine St Bellaire, TX 77401-4706 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/01/2024 | Payee name Omni Houston Hotel |
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| Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4 Riverway Houston, TX 77056-1915 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 59/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/01/2024 | 5 Payee name Omni Houston Hotel | |
| 6 Amount (\$) \$578.01 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 4 Riverway Houston, TX 77056-1915 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/31/2024 | Payee name Paychex | |
| Amount (\$) \$3,208.82 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 911 Panorama Trl S Rochester, NY 14625-2311 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/16/2024 | Payee name Paychex | |
| Amount (\$) \$170.00 <input checked="" type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 911 Panorama Trl S Rochester, NY 14625-2311 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Processing Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 60/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 01/31/2024 | 5 Payee name Paychex | |
| 6 Amount (\$) \$412.63 | 7 Payee address; City; State; Zip Code 911 Panorama Trl S Rochester, NY 14625-2311 | |
| <input checked="" type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Processing Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/12/2024 | Payee name Protect and Serve Texas PAC | |
| Amount (\$) \$10,000.00 | Payee address; City; State; Zip Code Po Box 622 Austin, TX 78767-0622 | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/06/2024 | Payee name Push Digital, LLC | |
| Amount (\$) \$16,666.67 | Payee address; City; State; Zip Code 342 E Bay St Charleston, SC 29401-1591 | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 61/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/20/2024 | 5 Payee name Push Digital, LLC |
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| 6 Amount (\$) \$15,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 342 E Bay St Charleston, SC 29401-1591 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/20/2024 | Payee name Push Digital, LLC |
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| Amount (\$) \$9,615.20 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 342 E Bay St Charleston, SC 29401-1591 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Text Messaging |
|------------------------|-----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/08/2024 | Payee name Ragnar Research Partners |
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| Amount (\$) \$9,467.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 103 E St SE Washington, DC 20003-2615 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Polling and Research |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 62/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/12/2024 | 5 Payee name Ragnar Research Partners |
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| 6 Amount (\$) \$13,500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 103 E St SE Washington, DC 20003-2615 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Polling and Research |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---------------------------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/22/2024 | Payee name Ryan Data & Research |
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| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 202675 Austin, TX 78720-2675 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Polling and Research |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/03/2024 | Payee name San Antonio Express News |
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| Amount (\$) \$19.96 <input checked="" type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 301 Avenue E San Antonio, TX 78205-2006 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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|----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 63/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/12/2024 | 5 Payee name Sir Speedy | |
| 6 Amount (\$) \$762.40 | 7 Payee address; City; State; Zip Code 211 E 7th St Ste 100 Austin, TX 78701-3253 | |
| <input checked="" type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/12/2024 | Payee name Sir Speedy | |
| Amount (\$) \$1,731.48 | Payee address; City; State; Zip Code 211 E 7th St Ste 100 Austin, TX 78701-3253 | |
| <input checked="" type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Board Meeting Briefing Books |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/26/2024 | Payee name Southwest Airlines | |
| Amount (\$) \$8.00 | Payee address; City; State; Zip Code 2702 Love Field Dr Dallas, TX 75235-1908 | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In Flight Wifi |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 64/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 01/29/2024 | 5 Payee name Southwest Airlines | |
| 6 Amount (\$) \$8.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2702 Love Field Dr Dallas, TX 75235-1908 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In Flight Wifi |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/12/2024 | Candidate/Officeholder name Spectrum Business | |
| Amount (\$) \$157.07 <input checked="" type="checkbox"/> Expenditure from corporate funds | Office sought PO Box 60074 City Of Industry, CA 91716-0074 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/15/2024 | Candidate/Officeholder name Sports Page Grill | |
| Amount (\$) \$32.87 <input type="checkbox"/> Expenditure from corporate funds | Office sought 3300 W Mockingbird Ln Dallas, TX 75235-5906 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 65/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/05/2024 | 5 Payee name Stephen F. Austin Hotel | |
| 6 Amount (\$) \$2.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 700 Congress Ave Austin, TX 78701-3217 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/05/2024 | Payee name Stephen F. Austin Hotel | |
| Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 700 Congress Ave Austin, TX 78701-3217 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/07/2024 | Payee name Stephen F. Austin Hotel | |
| Amount (\$) \$8,713.53 <input checked="" type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 700 Congress Ave Austin, TX 78701-3217 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Board Meeting Room Rental |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 66/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/05/2024 | 5 Payee name Stephen F. Austin Hotel |
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| 6 Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 700 Congress Ave Austin, TX 78701-3217 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/05/2024 | Payee name TSYS |
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| Amount (\$) \$135.80 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1 Tsys Way Columbus, GA 31901-4222 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Donation Processing |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/19/2024 | Payee name Tankersley, Kate |
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| Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 41964 Houston, TX 77241-1964 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Consultant Services |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 67/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/13/2024 | 5 Payee name Tankersley, Kate |
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| 6 Amount (\$) \$245.22 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 41964 Houston, TX 77241-1964 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage at \$.67 per mile |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/20/2024 | Payee name Targeted Creative Communications, Inc. |
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| Amount (\$) \$13,489.56 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 106 S Columbus St Alexandria, VA 22314-3036 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/20/2024 | Payee name Texas Hometown Solutions LLC |
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| Amount (\$) \$20,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 821 Liberty Meadows Dr Liberty Hill, TX 78642-6412 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Canvassing |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 68/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 01/31/2024 | 5 Payee name The Highland Dallas | |
| 6 Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 5300 E Mockingbird Ln Dallas, TX 75206-5108 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/31/2024 | Payee name The Highland Dallas | |
| Amount (\$) \$356.96 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 5300 E Mockingbird Ln Dallas, TX 75206-5108 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/29/2024 | Payee name The Lukens Company | |
| Amount (\$) \$7,200.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2800 Shirlington Rd Ste 900 Arlington, VA 22206-3601 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 69/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 02/20/2024 | 5 Payee name The Synapse Group | |
| 6 Amount (\$) \$15,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1738 Covered Bridge Pkwy Windsor, CO 80550-3699 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Canvassing |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/08/2024 | Candidate/Officeholder name The Wall Street Journal | |
| Amount (\$) \$42.21 <input checked="" type="checkbox"/> Expenditure from corporate funds | Office sought 1155 Ave Of The Americas New York, NY 10036 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription |
| Office held | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/21/2024 | Candidate/Officeholder name Tia Juanitas Fish Camp | |
| Amount (\$) \$127.49 <input type="checkbox"/> Expenditure from corporate funds | Office sought 5555 Calder Ave Beaumont, TX 77706-6301 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals |
| Office held | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 70/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/16/2024 | 5 Payee name Uber |
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| 6 Amount (\$) \$8.90 | 7 Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103-1331 |
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Expenditure from corporate funds

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ground Transportation |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---------------------------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/15/2024 | Payee name Uber |
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| Amount (\$) \$15.51 | Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103-1331 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ground Transportation |
|------------------------|----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|------------------------------------------------------------|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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|--------------------|--------------------|
| Date 02/15/2024 | Payee name Uber |
|--------------------|--------------------|

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|------------------------|--------------------------------------------------------------------------------------------|
| Amount (\$) \$14.88 | Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103-1331 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ground Transportation |
|------------------------|----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 71/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
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| 4 Date 02/15/2024 | 5 Payee name Uber |
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| 6 Amount (\$) \$37.49 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103-1331 |
|--------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|

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|---------------------------------|-----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ground Transportation |
|---------------------------------|-----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|--------------------------------------------------------------|-----------------------------|---------------|-------------|
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/08/2024 | Payee name Vipre Security |
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| Amount (\$) \$60.50 <input checked="" type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 50826 Los Angeles, CA 90074-0826 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Hosting Services |
|---------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/15/2024 | Payee name Vonlane |
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| Amount (\$) \$89.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 6310 Lemmon Ave Ste 125 Dallas, TX 75209-5812 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ground Transportation |
|---------------------------------|-----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 72/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
|------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|

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|-----------------------------|----------------------------------|
| 4 Date 02/01/2024 | 5 Payee name Walgreens |
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| 6 Amount (\$) \$18.00 | 7 Payee address; City; State; Zip Code 510 Chimney Rock Rd Houston, TX 77056-1220 |
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Expenditure from corporate funds

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
|---------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|---------------------------------------------------------------------|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---------------------------------------------------------------------|-----------------------------|---------------|-------------|

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|--------------------|-----------------------|
| Date 02/20/2024 | Payee name Walmart |
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|-------------------------|---------------------------------------------------------------------------------------|
| Amount (\$) \$156.88 | Payee address; City; State; Zip Code 4145 Dowlen Rd Beaumont, TX 77706-6852 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
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|------------------------------------------------------------|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|------------------------------------------------------------|-----------------------------|---------------|-------------|

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|--------------------|-----------------------|
| Date 02/20/2024 | Payee name Walmart |
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|-------------------------|---------------------------------------------------------------------------------------|
| Amount (\$) \$139.33 | Payee address; City; State; Zip Code 4145 Dowlen Rd Beaumont, TX 77706-6852 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals |
|-------------------------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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 Committee
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

| | | |
|------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|
| 1 Total pages Schedule F1: Sch: 73/73 Rpt: | 2 FILER NAME Associated Republicans of Texas Campaign Fund | 3 Filer ID (Ethics Commission Filers) 00015555 |
|------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|

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|-----------------------------|------------------------------------|
| 4 Date 02/22/2024 | 5 Payee name Whataburger |
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| 6 Amount (\$) \$28.82 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2300 Macarthur Dr Orange, TX 77630-4814 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals |
|---------------------------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| | | | |
|--------------------------------------------------------------|-----------------------------|---------------|-------------|
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--------------------------------------------------------------|-----------------------------|---------------|-------------|

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|--------------------|---------------------------------------------|
| Date 01/26/2024 | Payee name WinRed Technical Services LLC |
|--------------------|---------------------------------------------|

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|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| Amount (\$) \$2,893.83 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1776 Wilson Blvd Ste 530 Arlington, VA 22209-2517 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees 1/26/24-2/24/24 |
|-------------------------------|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

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| Date 02/12/2024 | Payee name Zoom Video Communications, Inc |
|--------------------|----------------------------------------------|

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| Amount (\$) \$17.05 <input checked="" type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 55 Almaden Blvd San Jose, CA 95113-1608 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Conference Call Services |
|-------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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|-----------------------------------------------------|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|-----------------------------------------------------|-----------------------------|---------------|-------------|

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| | | |
|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 1/1 Rpt: 113/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Date 01/31/2024 | 5 Name of person from whom amount is received Frost Bank | 8 Amount (\$) \$4,460.59 |
| | 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78205-1414 | |
| | 7 Purpose for which amount is received IOD Interest Payment | <input type="checkbox"/> Check if political contribution returned to filer |

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule T: Sch: 1/1 Rpt: 114/114 |
| 2 FILER NAME Associated Republicans of Texas Campaign Fund | | 3 Filer ID (Ethics Commission Filers) 00015555 |
| 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Lyft | | |
| 5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC | | |
| 6 Dates of Travel 01/28/2024 01/28/2024 | 7 Name of person(s) traveling Fulton, Alex | |
| | 8 Departure city or name of departure location Arlington | |
| | 9 Destination city or name of destination location Oxon Hill | |
| 10 Means of transportation Commercial Automobile | 11 Purpose of travel (including name of conference, seminar, or other event) Travel for RSLC conference | |