#### FORM PTY-CORP POLITICAL PARTY REPORT REGARDING FUNDS FROM CORPORATIONS AND LABOR ORGANIZATIONS **COVER SHEET PG 1** Filer ID 2 Total pages filed The Form PTY-CORP Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00023794 3 POLITICAL PARTY Burleson County Republican Party (P) **OFFICE USE ONLY** NAME Date Received STATE OR COUNTY **ELECTRONICALLY FILED** State **PARTY** 02/22/2024 X County: Burleson POLITICAL PARTY Democrat **TYPE** Republican Libertarian Other: Date Hand-delivered or Date Postmarked (Party name) Receipt # Amount POLITICAL PARTY ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE MAILING ADDRESS PO Box 770 Date Processed Change of Address CALDWELL, TX 77836 Date Imaged POLITICAL PARTY TITLE NICKNAME LAST **SUFFIX FIRST** MΙ **CHAIR** Karen Bolt **CHAIR MAILING** ADDRESS / PO BOX; STATE: ZIP CODE APT / SUITE #; CITY; **ADDRESS** PO Box 770 Change of Address Caldwell, TX 77836 CHAIR STREET STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **ADDRESS** 6772 County Rd. 308A (Residence or Business) Caldwell, TX 77836 AREA CODE PHONE NUMBER **10** CHAIR PHONE **EXTENSION** (979) 213-3138 11 REPORT TYPE January 15 X 8th day before primary election July 15 50th day before general election 12 PERIOD COVERED Month Day Year Month Day Year **THROUGH** 01/01/2024 02/23/2024

## FORM PTY-CORP POLITICAL PARTY REPORT: **TOTALS AND AFFIDAVIT COVER SHEET PG 2** 14 Filer ID 13 POLITICAL PARTY NAME (Ethics Commission Filers) 00023794 Burleson County Republican Party (P) 15 TOTALS 1. TOTAL CONTRIBUTIONS FROM CORPORATE OR LABOR **ORGANIZATIONS** \$ 500.00 (OTHER THAN LOANS OR GUARANTEES OF LOANS) 2. TOTAL EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS \$ 750.00 3. TOTAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 9.128.15 A political party must file a report on FORM PTY-CORP for any reporting period during which the party accepts corporate or labor organization contributions, maintains corporate or labor organization contributions, or makes expenditures from corporate or labor organization contributions. 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. Karen Bolt Signature of Political Party Chair AFFIX NOTARY STAMP / SEAL Sworn to and subscribed before me, by the said \_\_\_\_\_, 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

### FORM PTY-CORP **SUBTOTALS - PTYCORP COVER SHEET PG 3** 17 POLITICAL PARTY NAME 18 Filer ID (Ethics Commission Filers) Burleson County Republican Party (P) 00023794 19 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR X \$ 500.00 **ORGANIZATION** SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR 2. \$ LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$ 3. SCHEDULE E: LOANS \$ SCHEDULE F1: EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION 5. X 750.00 \$ **CONTRIBUTIONS** SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

## SCHEDULE C1

	The Instruc	cti	on Guide explains how to complete this form.	1	Total pages Schedule C1: Sch: 1/1 Rpt: 4/5			
2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Burleson Co	unt	ty Republican Party (P)		00023794			
4	Date	5	Corporation / Labor Organization name	7	Amount of contribution (\$)			
	02/19/2024	6	Citizens State Bank  Corporation / Labor Organization address; City; State; Zip Code  Somerville, TX 77879		\$500.00			

## EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Services		Sala		plete this form.		OTHER (enter a		ed above)
1	Total pages Schedule F1:	2	FILER NAME	=					3	Filer ID	(Ethics Com	mission Filers)
	Sch: 1/1 Rpt: 5/5	Burleson County Republican Party (P)								00023794		
4	Date	5	Payee name									
	01/09/2024	Mann, Cindy										
6	Amount (\$)	7	Payee address; City; State; Zip Code									
	\$750.00	12543 Honeywood Trail										
Х	Expenditure from corporate funds		Houston, T	X 77077								
8	PURPOSE	(a)	Category (S	ee Categories lis	sted at the top of	this schedule)	(b	) Description				
	OF EXPENDITURE		Advertising					Check if travel of	outsi	de of Texas. Com	plete Schedule T	
								A website wa Burleson Cou				
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	iceholder na	me	Office	sough	t		Office he	eld	