FORM CEC COUNTY EXECUTIVE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The CEC Instruction Guide explains how to complete this form. 00055268 3 COMMITTEE NAME **OFFICE USE ONLY Bastrop County Republican Party** Date Received **ELECTRONICALLY FILED** 02/24/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 443 Highway 71 W Date Hand-delivered or Date Postmarked Change of Address Bastrop, TX 78602 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** James NAME NICKNAME LAST **SUFFIX** Page STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 375 Peach Creek Road STREET **ADDRESS** (Residence or Business) Rosanky, TX 78953 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 375 Peach Creek Road MAILING **ADDRESS** Rosanky, TX 78953 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 332-1920 PHONE REPORT January 15 30th day before election Final Report **TYPE** 10th day after campaign treasurer 8th day before election July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/26/2024 02/24/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/05/2024 General Special **GO TO PAGE 2**

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Bastrop County Republic	can Party			000552	268
4 COMMITTEE	1. Candidates	A. Supported		1	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this		B. Opposed			
report if necessary.)					
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders				
	Assisted (Identify by name or, if applicable, classify by party.)				
.5 CONTRIBUTION TOTALS	PLEDGES, LOAN CONTRIBUTIONS	ZED POLITICAL CON S, OR GUARANTEES MADE ELECTRONIC ort qualifies for the highe	CALLY)	\$	0.00
		CAL CONTRIBUTION LEDGES, LOANS, OF	DNS R GUARANTEES OF LOANS)	\$	815.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICAL EXPE	ENDITURES	\$	0.00
	4. TOTAL POLITION	CAL EXPENDITUR	ES	\$	410.12
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT		MAINTAINED AS OF THE LAST	T DAY \$	815.00
OUTSTANDING LOAN TOTALS		AL AMOUNT OF ALL (E REPORTING PERI	OUTSTANDING LOANS AS OF OD	THE \$	410.12
6 AFFIDAVIT				-	
		true	ear, or affirm, under penalty of p and correct and includes all info er Title 15, Election Code.		
			lom	oo Dogo	
			Signature of Ca	es Page ampaign Tre	easurer
			Signature of Co	anpaign He	ouodioi
AFFIX NOTARY	STAMP / SEAL ABOV	E			
Sworn to and subscribed	before me, by the said			this the	day
of	, 20, to certi	fy which, witness my h	nand and seal of office.		
Signature of officer adn	ninistering oath	Printed name of off	ficer administering oath	Title of	f officer administering oath

SUBTOTALS - CEC

FORM CEC COVER SHEET PG 3

				3 of 9				
17 COMMITTEE NAM	IE .	18 Filer ID	(Ethics Commission	on Filers)				
Bastrop County F	Republican Party	00055268						
	9 SCHEDULE SUBTOTALS NAME OF SCHEDULE							
1. X SCHE	EDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	815.00				
2. X SCHE	DULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00				
3. X SCHE	EDULE B: PLEDGED CONTRIBUTIONS		\$	0.00				
4. X SCHE	DULE E: LOANS		\$	0.00				
5. X SCHE	DULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	410.12				
6. X SCHE	DULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00				
7. SCHE	DULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
8. X SCHE	DULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00				
9. SCHE	DULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$					
10. SCHE	DULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F LER	RETURNED	\$					
			1					

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/9	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	n Filers)
4	Date 02/18/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$300.00
8	Principal occu	Paige, TX 78659 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	*unknown	pation / 300 title (See Instructions)	employer (See Instructions)		
	Date 02/23/2024	Full name of contributor		Amount of Contribution (\$)	\$250.00	
	Dringing! goog	Cedar Creek, TX 78612	Employer (See Instructions			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 02/08/2024	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
		Austin, TX 78711				
	Principal occu State Senato	pation / Job title (See Instructions) or	Employer (See Instructions)		
	Date 01/29/2024	Full name of contributor)		Amount of Contribution (\$)	\$15.00
	Principal occu Premium Se	pation / Job title (See Instructions) rvices	Employer (See Instructions)		

PLEDGED CONTRIBUTIONS	SCHEDULE B
The Instruction Guide explains how to complete this	form. 1 Total pages Schedule B: Sch: 1/1 Rpt: 5/9
2 FILER NAME Bastrop County Republican Party	3 Filer ID (Ethics Commission Filers) 00055268
TOTAL OF UNITEMIZED PLEDGES	\$ 0.00
5 Date 6 Full name of pledgorout-of-state PAC (ID#: 7 Pledgor Address; City; State; Zip Code	8 Amount of pledge (\$) 9 In-kind description (If applicable)
	Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (See Instructions)	oyer (See Instructions)

	LOANS						SCH	EDULE E	
	The Instructio	on Guide explains how to c	omplete this f	orm.	1		ges Schedule E: 1 Rpt: 6/9		
2	FILER NAME Bastrop County	Republican Party			3	Filer ID 000552	(Ethics Commis	ssion Filers)	
4	TOTAL OF UN	IITEMIZED LOANS					\$	0.0	0
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:)	9 Loan Amour	nt (\$)	_
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code			10 Interest Rate		
							11 Maturity Dat	e	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See In	nstructions)				
14	Description of Coll	ateral		15 Check if persona	I funds were	deposited	d into political account (See Instructions)		
16	GUARANTOR INFORMATION	17 Name of guarantor					19 Amount Gua	aranteed (\$)	
	not applicable	18 Guarantor address; City;	State;	Zip Code					
20	Principal occupation	on		21 Employer (See In	nstructions)				
					, 				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising Expense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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

	Credit Card Payment		The Instruction Guide explains	s how to con	plete this fo	rm.			
1	Total pages Schedule F1:	l				3	Filer ID 00055268	(Ethics Commission Filers	;)
_	Sch: 1/3 Rpt: 7/9 Date		astrop County Republican Party				00055206		
4	02/01/2024	ı	ayee name lluebonnet Electric						
6	Amount (\$) \$174.53	l	ayee address; City; State O Box 240	e; Zip Coo	e				
		G	siddings, TX 78942-0240						
8	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the top of this so office Overhead/Rental Expense	chedule)		c if travel outsion of the contract of the con	de of Texas. Comp officeholder living		
9	Complete ONLY if direct expenditure to benefit C/O		ndidate/Officeholder name	Office soug	ht		Office he	eld	
	Date 02/23/2024	ı	ayee name IailChimp						
	Amount (\$) \$47.97	P c. 6	·	e; Zip Coc	e				
	PURPOSE OF EXPENDITURE	ı	ategory (See Categories listed at the top of this so dvertising Expense	chedule)	Check	c if travel outsi	de of Texas. Comp officeholder living		
	Complete ONLY if direct expenditure to benefit C/O		ndidate/Officeholder name	Office soug	ht		Office he	eld	
	Date 02/05/2024	ı	ayee name pectrum Business						
	Amount (\$) \$120.50	l	ayee address; City; State 145 S. Falkenburg Rd.	e; Zip Cod	e				
		R	tiverview, FL 33578-8652						
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the top of this so Office Overhead/Rental Expense	chedule)	Check	c if travel outsi	de of Texas. Comp		
	Complete ONLY if direct expenditure to benefit C/O		ndidate/Officeholder name	Office soug	ht		Office he	eld	

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 C

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

nt Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 2/3 Rpt: 8/9	Bastrop County Republican Party 00055268
4	Date	5 Payee name
	01/29/2024	Square Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$0.49	1455 Market St
		Suite 600
		San Francisco, CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	ZXI ZXIDITORZ	Check if Austin, TX, officeholder living expense
		Merch Svcs Fees
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/Ol	
	Date	Payee name
	02/08/2024	Square Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$7.75	1455 Market St
		Suite 600
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Merch Svcs Fees
		Wordin Gvos i cos
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/18/2024	Square Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.00	1455 Market St
	Ψ0.00	Suite 600
		San Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Merch Svcs Fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
_		

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 Event Expense Fees Food/Beverage Expense Gift/Award/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

ent Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee I	Gift/Awards/Memorial Legal Services The Instruction G	·		ages/	Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed abo	ve)
1	Total pages Schedule F1: Sch: 3/3 Rpt: 9/9			nty Republica	n Party				l	Filer ID 00055268	(Ethics Commission	on Filers)
4	Date 02/23/2024	5	Payee name Square Inc									
6	Amount (\$) \$7.75		Payee addres 1455 Market Suite 600 San Francisc		State;	Zip Co	de 					
8	PURPOSE OF EXPENDITURE		Category (See	e Categories listed at	the top of this sch	edule)		ш	, TX,	officeholder living	plete Schedule T. g expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	eholder name	C	Office sou	ght			Office he	eld	
	Date 01/29/2024		Payee name Walmart									
	Amount (\$) \$42.13		Payee addres 488 Highway Bastrop, TX	71 W	State;	Zip Co	de					
	PURPOSE OF EXPENDITURE	(a)		e Categories listed at ead/Rental Ex		edule)		—		de of Texas. Com officeholder livinç	plete Schedule T. g expense	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	eholder name	C	Office sou	ght			Office he	eld	