

**POLITICAL PARTY REPORT REGARDING FUNDS
FROM CORPORATIONS AND LABOR ORGANIZATIONS**

**FORM PTY-CORP
COVER SHEET PG 1**

The Form PTY-CORP Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00024059	2 Total pages filed 5				
3 POLITICAL PARTY NAME	Williamson County Republican Party (P)		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 02/26/2024 Date Hand-delivered or Date Postmarked				
4 STATE OR COUNTY PARTY	<input type="checkbox"/> State <input checked="" type="checkbox"/> County: <u>Williamson</u>						
5 POLITICAL PARTY TYPE	<input type="checkbox"/> Democrat <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Libertarian <input type="checkbox"/> Other: _____ (Party name)						
6 POLITICAL PARTY MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 393 Round Rock, TX 78680-0393		Receipt #				
			Amount				
			Date Processed				
			Date Imaged				
7 POLITICAL PARTY CHAIR	TITLE	FIRST	MI	NICKNAME	LAST	SUFFIX	
		Steve			Armbruster		
8 CHAIR MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O.Box 393 Round Rock, TX 78680						
9 CHAIR STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 8908 Splitarrow Dr Austin, TX 78717						
10 CHAIR PHONE	AREA CODE	PHONE NUMBER			EXTENSION		
	(512)	956-6761					
11 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 8th day before primary election <input type="checkbox"/> July 15 <input type="checkbox"/> 50th day before general election						
12 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	01/01/2024				02/24/2024		

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**POLITICAL PARTY REPORT:
TOTALS AND AFFIDAVIT**

**FORM PTY-CORP
COVER SHEET PG 2**

13 POLITICAL PARTY NAME Williamson County Republican Party (P)		14 Filer ID (Ethics Commission Filers) 00024059
15 TOTALS	1. TOTAL CONTRIBUTIONS FROM CORPORATE OR LABOR ORGANIZATIONS (OTHER THAN LOANS OR GUARANTEES OF LOANS)	\$ 9,750.00
	2. TOTAL EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS	\$ 3,584.00
	3. TOTAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 6,197.41

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.

The Honorable Steve Armbruster

Signature of Political Party Chair

AFFIX NOTARY STAMP / SEAL

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

SUBTOTALS - PTYCORP**FORM PTY-CORP
COVER SHEET PG 3**
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17 POLITICAL PARTY NAME Williamson County Republican Party (P)		18 Filer ID (Ethics Commission Filers) 00024059
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 9,750.00
2.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
3.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS	\$ 3,584.00
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/1 Rpt: 4/5
2 FILER NAME Williamson County Republican Party (P)		3 Filer ID (Ethics Commission Filers) 00024059
4 Date 02/07/2024	5 Corporation / Labor Organization name Alladdin Carpet and Interiors	7 Amount of contribution (\$) \$150.00
	6 Corporation / Labor Organization address; City; State; Zip Code Taylor, TX 76574	
Date 02/08/2024	Corporation / Labor Organization name Environmental Treatment Technologies, LLC	Amount of contribution (\$) \$3,000.00
	Corporation / Labor Organization address; City; State; Zip Code Georgetown, TX 78626	
Date 02/06/2024	Corporation / Labor Organization name Grand Endeavor	Amount of contribution (\$) \$3,000.00
	Corporation / Labor Organization address; City; State; Zip Code Leander, TX 78641	
Date 02/07/2024	Corporation / Labor Organization name LoanCo, Inc.	Amount of contribution (\$) \$600.00
	Corporation / Labor Organization address; City; State; Zip Code Taylor, TX 76574	
Date 02/07/2024	Corporation / Labor Organization name Texas Crushed Stone	Amount of contribution (\$) \$3,000.00
	Corporation / Labor Organization address; City; State; Zip Code Georgetown, TX 78627	

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
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: 1/1 Rpt: 5/5	2 FILER NAME Williamson County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00024059
4 Date 02/01/2024	5 Payee name Doering Trust	
6 Amount (\$) \$3,540.00	7 Payee address; City; State; Zip Code 712 S Rock St Georgetown, TX 78626	
<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. First Quarter Rent
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/02/2024	Payee name PNC Bank	
Amount (\$) \$22.00	Payee address; City; State; Zip Code 10 Spring St Georgetown, TX 78626	
<input checked="" 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. Bank Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/01/2024	Payee name PNC Bank	
Amount (\$) \$22.00	Payee address; City; State; Zip Code 10 Spring St Georgetown, TX 78626	
<input checked="" 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. Bank Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held