FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00085839 3 COMMITTEE NAME **OFFICE USE ONLY Grayson County Conservatives** Date Received **ELECTRONICALLY FILED** 02/26/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO BOX 1903 Date Hand-delivered or Date Postmarked Change of Address VAN ALSTYNE, TX 75495 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Sandra L. NAME NICKNAME LAST **SUFFIX** Lawson STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 5662 F.M. 2729 STREET **ADDRESS** (Residence or Business) Tom Bean, TX 75489 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** P.O. Box 1903 MAILING **ADDRESS** Van Alstyne, TX 75495 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 802-6503 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/27/2024 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**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME				13 Filer II	D (Ethics Commission Fi	ilers)	
Grayson County Cons	servatives			00085	5839		
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ju	dge John Devine Supre	eme Court Ch	ief Justice		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	Measures (Describe by date and location of election and nature of issue.)	A. Supported					
		B. Opposed					
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
5 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	OR GUARANTEES IADE ELECTRONIC	ALLY)	AN \$	3	0.00	
		2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)					
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	\$	3	0.00			
	4. TOTAL POLITICA	L EXPENDITURE	S	\$	6,8	353.02	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING		IAINTAINED AS OF THE L	_AST DAY	6,8	350.11	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE I		UTSTANDING LOANS AS	S OF THE \$	6,8	353.02	
6 AFFIDAVIT							
		true a			the accompanying report is quired to be reported by me		
			Mrs S	Sandra L. Law	nos/		
				of Campaign Tr		_	
AFFIX NOTAR	RY STAMP / SEAL ABOVE		-	-			
	ed before me, by the said			, this the	day		
of	, 20, to certify \	which, witness my ha	and and seal of office.				
Signature of officer a	administering oath	Printed name of offi	cer administering oath	Title o	of officer administering oath	_	

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 3 of 10

			13 Filer ID	(Ethics Commission Filers)
ervatives			00085839	
Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	David Schenck Court Of Crimin	nal Appeals, Jud	lge
	B. Opposed			
Measures (Describe by date and location of election and nature of issue.)	A. Supported			
	B. Opposed			
Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jace Yarbrough State Senator		
	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.)				
Candidates (Identify by name or, if applicable, classify by party.)		Shelley Luther State Represent	tative	
	B. Opposed			
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
	B. Opposed			
3. Officeholders				
	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.)	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Describe by date and location of election and nature of issue.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 4. Supported (Identify by name or, if applicable, classify by party.) 5. Candidates (Identify by name or, if applicable, classify by party.) 6. Supported (Identify by name or, if applicable, classify by party.) 7. Candidates (Identify by name or, if applicable, classify by party.) 8. Opposed (Describe by date and location of election and nature of issue.) 8. Opposed (Describe by date and location of election and nature of issue.) 8. Opposed (Describe by date and location of election and nature of issue.)	1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (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.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed A. Supported Jace Yarbrough State Senator danglicable, classify by party.) B. Opposed 4. Supported Jace Yarbrough State Senator supplicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed A. Supported Shelley Luther State Represent Shelley Luther State Represent (Describe by date and location of election and nature of issue.) B. Opposed A. Supported Shelley Luther State Represent Shelley Luther State Represent Describe by date and location of election and nature of issue.) B. Opposed B. Opposed	Privatives 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 4. Supported Jace Yarbrough State Senator (Identify by name or, if applicable, classify by party.) 5. Opposed Describe by date and location of election and nature of issue.) 6. Opposed Describe by date and location of election and nature of issue.) 7. Candidates (Identify by name or, if applicable, classify by party.) 8. Opposed Describe by date and location of election and nature of issue.) 8. Opposed Shelley Luther State Representative (Identify by name or, if applicable, classify by party.) 9. Opposed Describe by date and location of election and nature of issue.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.)

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC **ADDENDUM**

						Page 4 of 10
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Grayson County Conse	ervatives				00085839	
14 COMMITTEE ACTIVITY (Attach lists on plain	Candidates (Identify by name or, if applicable, classify by party.)		John Hill Distr	rict Attorney		
paper to complete this report if necessary.)		Б. Орросси				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Josh Marr Co	unty Commission	er	
(Attach lists on plain paper to complete this report if necessary.)		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	Candidates (Identify by name or, if applicable, classify by party.)		Todd Booher	Constable		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	Assisted					

GENERAL-PURPOSE COMMITTEE REPORT:

FORM GPAC

PURPOSE						Page 5 of 10
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Grayson County Conser	vatives				00085839	(Lanes Commission Filers)
	Candidates	Δ Sunnorted	Pront Lawson	County Party Ch		
	(Identify by name or, if applicable, classify by party.)	л. опропец	bient Lawson	County Farty Ch	ali	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted					
	(Identify by name or, if applicable, classify by party.)					

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			6 of 10
17 COMMIT	EE NAME County Conservatives	18 Filer ID 00085839	(Ethics Commission Filers)
	-	0000000	
l	LE SUBTOTALS SCHEDULE	SUBTOTAL AMOUNT	
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 6,570.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	!	\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9. X	SCHEDULE E: LOANS		\$ 6,853.02
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 6,853.02
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

	MONET	ARY POLITICAL CO		E A1			
	The Instru	ction Guide explains how to	n.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 7/10		
2	FILER NAME Grayson Cou	unty Conservatives			3	Filer ID (Ethics Commission 00085839	on Filers)
4	Date 02/20/2024	5 Full name of contributorBrooks, Britton6 Contributor address; City; State	7	Amount of Contribution (\$)	\$400.00		
		Sherman, TX 75092					
8	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions Self)			
	Date Full name of contributor out-of-state PAC (ID#:) 02/14/2024 Hill, John Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$300.00
	Principal occu	Sherman , TX 75090 pation / Job title (See Instructions)	Employer (See Instructions)			
	Lawyer	patient, cos title (coe moracione)		Self	,		
	Date Full name of contributor out-of-state PAC (ID#:) Hill, John Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$1,500.00
		Sherman , TX 75090					
	Lawyer	pation / Job title (See Instructions)		Employer (See Instructions Self)		
	Date Full name of contributor out-of-state PAC (ID#:) Jace for Texas Contributor address; City; State; Zip Code Sanger, TX 76266-4910					Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 02/20/2024	Full name of contributor Lawson, Brent Contributor address; City; State Van Alstyne, TX 75495-1903		Amount of Contribution (\$)	\$200.00		
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 2/2 Rpt: 8/10		
2	FILER NAME Grayson Co	unty Conservatives	3	Filer ID (Ethics Commissi 00085839	on Filers)	
4	Date 02/20/2024	5 Full name of contributor out-of-state PAC (ID#:_Marr, Josh 6 Contributor address; City; State; Zip Code	7	Amount of Contribution (\$)	\$2,000.00	
8	Principal occu	Van Alstyne , TX 75495 upation / Job title (See Instructions)	Employer (See Instructions Self	<u> </u> s)		
	Date 02/23/2024	Full name of contributor out-of-state PAC (ID#:_ Shelley Luther Campaign Contributor address; City; State; Zip Code Sherman , TX 75090		Amount of Contribution (\$)	\$160.00	
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 02/14/2024	Full name of contributor out-of-state PAC (ID#:_ Taylor, Linda Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Sherman, TX 75090 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		

6 Is lender a financial 8 Lender address; City; State; Zip Code 10 Interest Rate	L	OANS				SCHEDULE E
Grayson County Conservatives 4 TOTAL OF UNITEMIZED LOANS 5 Date of loan 02/19/2024 6 Is lender a financial institution? No VAN ALSTYNE, TX 75495 12 Principal occupation of Colletral X None 14 Description of Colletral X None 15 Check if personal funds were deposited into political account (See Instructions) N/A 16 GUARANTON INFORMATION X not applicable 17 Name of guarantor (See Instructions) City; State; Zip Code 18 Eunder address; City; State; Zip Code 10 Interest Rate 10 Interest Rate 11 Maturity Date 15 Check if personal funds were deposited into political account (See Instructions) 16 GUARANTON INFORMATION X Interest Rate 2 Interest Rate 3 Interest Rate 4 Interes	Th	ne Instructio	n Guide explains how to complete thi	s form.	1	
TOTAL OF UNITEMIZED LOANS 5 Date of loan			Conservatives		1	
Column C	4 TC	OTAL OF UN	ITEMIZED LOANS		·	\$
financial institution? No VAN ALSTYNE, TX 75495 12 Principal occupation / Job title (See Instructions) Teacher 14 Description of Collateral X None 15 Check if personal funds were deposited into political account (See Instructions) N/A See Instructions) 18 Guarantor address; City; State; Zip Code				PAC (ID#:)	9 Loan Amount (\$) \$6,853.02
Teacher 13 Employer (See Instructions) Quest Whitewright 14 Description of Collateral X None 15 Check if personal funds were deposited into political account (See Instructions) N/A 16 GUARANTOR INFORMATION X not applicable 18 Guarantor address; City; State; Zip Code 19 Amount Guaranteed (\$)	fina ins	ancial stitution?	8 Lender address; City; State	; Zip Code		00
Teacher 14 Description of Collateral None Description of Collateral Collate	No)	VAN ALSTYNE, TX 75495			11 Maturity Date
INFORMATION In			on / Job title (See Instructions)		s)	
INFORMATION X not applicable 18 Guarantor address; City; State; Zip Code		-	ateral		ere deposited	-
			17 Name of guarantor	-		19 Amount Guaranteed (\$)
20 Principal occupation 21 Employer (See Instructions)	Х	not applicable	18 Guarantor address; City; State	; Zip Code		
20 Principal occupation 21 Employer (See Instructions)						
	20 Pri	incipal occupatio	on	21 Employer (See Instruction	s)	

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/Awards/Memorials Expense 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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ı - I Cor	mmittee	Gift/Awards/Memorials Legal Services The Instruction Gu			pense ages/Contract Labor		Travel Out of Dis OTHER (enter a	trict category not listed abov	/e)
┰	Total pages Schedule F1:	2			<u> </u>		<u> </u>	12	Filer ID	(Ethics Commissio	n Filers)
	Sch: 1/1 Rpt: 10/10	_		unty Conservat	ives				00085839	(Euros Commissio	
4	Date	5	Payee name					•			
	02/19/2024			orate Companie	es						
6	Amount (\$)	7	Payee address	ss; City;	State;	Zip Cod	le				
	\$6,853.02		801 Station	Dr. Suite 109							
┢	Expenditure from corporate funds		Arlington, T	X 76015							
8	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sche	edule)	(b) Description				
l	OF EXPENDITURE		Advertising		•		Check if trave	l outsi	ide of Texas. Com	plete Schedule T.	
l	LAFENDITORE						ш	in, TX	, officeholder living	expense	
l							Mailer				
l											
9	Complete ONLY if direct expenditure to benefit C/O	4	Candidate/Offic	ceholder name	C	Office soug	ht		Office he	eld	