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. 16 00086977 3 COMMITTEE NAME **OFFICE USE ONLY** Jefferson County Republican Party Date Received **ELECTRONICALLY FILED** 07/03/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 148 South Dowlen Rd. Date Hand-delivered or Date Postmarked #627 Change of Address Beaumont, TX 77707 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Patricia NAME NICKNAME LAST **SUFFIX** Greene STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 4400 Morning Star Pl. STREET **ADDRESS** (Residence or Business) Beaumont, TX 77705 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 4400 Morning Star Pl. MAILING **ADDRESS** Beaumont, TX 77705 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (409) 626-2585 PHONE REPORT January 15 30th day before election Final Report **TYPE** 10th day after campaign treasurer 8th day before election July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 05/19/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 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)		
Jefferson County Repul	Jefferson County Republican Party					
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Republican				
(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.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOAN CONTRIBUTIONS	ED POLITICAL CONTRIBUTIONS (OTHER THAN S, OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) ort qualifies for the higher itemization threshold	\$	0.00		
		CAL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	6,101.24		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICAL EXPENDITURES	\$	0.00		
	4. TOTAL POLITION	CAL EXPENDITURES	\$	6,141.86		
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT	L CONTRIBUTIONS MAINTAINED AS OF THE LAST ING PERIOD	DAY \$	196,996.40		
OUTSTANDING LOAN TOTALS		L AMOUNT OF ALL OUTSTANDING LOANS AS OF T E REPORTING PERIOD	THE \$	0.00		
16 AFFIDAVIT	•		•			
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.				
		Ms. Patric	cia Greene			
		Signature of Car	mpaign Trea	surer		
AFFIX NOTARY	STAMP / SEAL ABOV	Е				
Sworn to and subscribed	before me, by the said	, tł	nis the	day		
		fy which, witness my hand and seal of office.				
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of o	fficer administering oath		

SUBTOTALS - CEC FORM CEC COVER SHEET PG 3 3 of 16 COMMITTEE NAME Jefferson County Republican Party 18 Filer ID (Ethics Commission Filers) 00086977

	MMITTE	(Ethics Commission Filers)						
Je	Jefferson County Republican Party 00086977							
	HEDULI ME OF		SUBTOTAL AMOUNT					
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 6,101.24				
2.			\$					
3.		\$						
4.		\$						
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 6,141.86					
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
7.		ONS	\$					
8.		\$						
9.		\$						
10.		\$						

	MONET	ARY POLITICAL CONTRII	SCHEDULE A1				
	The Instruc	etion Guide explains how to comple	ete this for	m.	1	Total pages Schedule A1: Sch: 1/6 Rpt: 4/16	
2	FILER NAME Jefferson Co	unty Republican Party			3	Filer ID (Ethics Commission 00086977	n Filers)
4	Date 05/21/2024	Carr , DINA (Ms.)	PAC (ID#:)	7	Amount of Contribution (\$)	\$50.00
_	Deire diesel en en	Beaumont, TX 77705	la.	Faralassa (O. a. kastausti ara	$\overline{\Gamma}$		
8	Principal occur Retired	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/18/2024 Carr , DINA (Ms.) Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$25.00
		Beaumont, TX 77705					
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 05/21/2024				Amount of Contribution (\$)	\$150.00	
		Beaumont, TX 77706					
	Principal occu Housewife	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/18/2024 Dishman, Cindy (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77706			Amount of Contribution (\$)	\$75.00		
	Principal occu Housewife	pation / Job title (See Instructions)		Employer (See Instructions	<u>(</u>		
	Date 06/11/2024					Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			L				

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 5/16	
2	FILER NAME Jefferson Co	unty Republican Party		3	Filer ID (Ethics Commission 00086977	n Filers)
4	Date 06/20/2024	 Full name of contributor out-of-state PAC (ID#:_Faraci, Danielle (Ms.) Contributor address; City; State; Zip Code 	7	Amount of Contribution (\$)	\$30.00	
_		Beaumont, TX 77705				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 05/21/2024	Full name of contributor out-of-state PAC (ID#:_Figari, Stephanie (Ms.) Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$100.00	
	<u> </u>	Beaumont, TX 77706	5 1 (0 1 1 1			
	Principal occu Housewife	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/18/2024 Figari, Stephanie (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Beaumont, TX 77706				
	Principal occu Housewife	pation / Job title (See Instructions)	Employer (See Instructions	i)		
Date Full name of contributor out-of-state PAC (ID#:) 06/20/2024 Gabrysch, Donna (Ms.) Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$60.00	
Beaumont, TX 77707 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) none				5)		
	Date Full name of contributor out-of-state PAC (ID#:) 05/21/2024 Greene, Pat Contributor address; City; State; Zip Code Beaumont, TX 77705				Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CON	SCHEDULE A1				
	The Instru	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/16	
2	FILER NAME Jefferson Co	unty Republican Party			3	Filer ID (Ethics Commission 00086977	on Filers)
4	Date 06/24/2024	Griesz, Gordan (Judge)	c-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$25.00
_		Nederland, TX 77627					
8	Principal occu Family Court	pation / Job title (See Instructions) Judge	9	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 05/20/2024 Hall, Ann (Ms.) Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$25.00
	Nederland, TX 77627						
	Retired	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/18/2024 Hall, Ann (Ms.) Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$25.00	
		Nederland, TX 77627					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions)		
Date O6/11/2024 Full name of contributor out-of-state PAC (ID#:) Henderson, Elaine (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77706				Amount of Contribution (\$)	\$100.00		
Principal occupation / Job title (See Instructions) Retired Employer (See Instruction				Employer (See Instructions)		
	Date 05/21/2024					Amount of Contribution (\$)	\$1,044.87
Principal occupation / Job title (See Instructions) Employer (See Instructions							
			'				

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1	
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 4/6 Rpt: 7/16
2	FILER NAME Jefferson Co	unty Republican Party		3	Filer ID (Ethics Commission Filers) 00086977
4	Date 06/05/2024	 Full name of contributor	7	Amount of Contribution (\$) \$3,816.37	
•	Dringinal acqu	Beaumont, TX 77707 pation / Job title (See Instructions)	9 Employer (See Instructions		
0	Fillicipal occu	Janoi 17 Job line (See Instructions)	Employer (See instructions)	
	Date 05/24/2024	Full name of contributor out-of-state PAC (ID#: Madry, Bruce (Mr.) Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$50.00	
		Groves, TX 77619	1		
	Industrial Wo	pation / Job title (See Instructions) Irker	Employer (See Instructions)	
	Date 06/24/2024				Amount of Contribution (\$) \$50.00
		Groves, TX 77619			
	Principal occu Industrial Wo	oation / Job title (See Instructions) orker	Employer (See Instructions)	
	Date Full name of contributor out-of-state PAC (ID#:) 06/17/2024 Maggio, Marie (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77706			Amount of Contribution (\$) \$100.00	
	Principal occu Retired	pation / Job title (See Instructions))		
	Date O6/17/2024 Full name of contributor out-of-state PAC (ID#:) Munro, Mary (Ms.) Contributor address; City; State; Zip Code Beaumont , TX 77707				Amount of Contribution (\$) \$50.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions)	

	MONET	ARY POLITICAL CONTRIBUT		SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 5/6 Rpt: 8/16	
2	FILER NAME Jefferson Co	unty Republican Party		3	Filer ID (Ethics Commission 00086977	n Filers)
4	Date 06/07/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
_		Groves, TX 77619	1	Ĺ		
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 05/24/2024	Full name of contributor out-of-state PAC (IE Patton, James (Mr.) Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$25.00	
		Beaumont, TX 77703				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/24/2024 Patton, James (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00	
		Beaumont, TX 77703				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/06/2024 Simoneaux, Clifton (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00	
	Principal occu Imaging Dire	Nederland, TX 77627 pation / Job title (See Instructions) ctor	Employer (See Instructions	<u> </u> S)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/20/2024 Smith, Saundra Contributor address; City; State; Zip Code Nederland, TX 77627				Amount of Contribution (\$)	\$50.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			'			

MONET	ARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A1
The Instru	ction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 6/6 Rpt: 9/16	
FILER NAME Jefferson Co			3 Filer ID (Ethics Commission Filers) 00086977
Date 06/13/2024	 Full name of contributor	#:)	7 Amount of Contribution (\$) \$25.00
	Conroe, TX 77301	1	
		9 Employer (See Instructions	s)
	The Instru FILER NAME Jefferson Co Date 06/13/2024	The Instruction Guide explains how to complete this FILER NAME Jefferson County Republican Party Date 06/13/2024 5 Full name of contributor out-of-state PAC (ID# Off) Wright, Jay (Mr.) 6 Contributor address; City; State; Zip Code	Date 06/13/2024 Solid Full name of contributor

SCHEDULE F1

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

Fees Office Overhear
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expens
Legal Services Salaries/Wages

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarias/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/7 Rpt: 10/16	Jefferson County Republican Party 00086977
4	Date	5 Payee name
	05/20/2024	2022 Block Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1.03	1455 Market St. Ste. 600
		san Francisco, CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/24/2024	2022 Block Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.93	1455 Market St. Ste. 600
		san Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Donations paid by Credit Cards Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Fees
		orealt out the cos
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/06/2024	2022 Block Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.03	1455 Market St. Ste. 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.
	ZXI ZXIDITORZ	Credit Card Sange Charge
		Credit Card Service Charge
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

mbursement Solicitation/Fundraising Expense
tal 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	/ - al Comn	nittee Lega	Awards/Memorials Ex al Services			ages/	Contract Labor		Travel Out of I OTHER (enter	District a category not lis	sted above)
L	•			Instruction Guid	e explains l	now to cor	mple	te this form.	_			
1	Total pages Schedule F1:	ı							3	Filer ID	•	nmission Filers)
	Sch: 2/7 Rpt: 11/16	<u> </u>	efferson Cour	ty Republican	Party					00086977	*	
4	Date	ı	ayee name									
	06/11/2024	2	2022 Block Inc									
6	Amount (\$)	7 F	Payee address;	City;	State;	Zip Cod	de					
	\$4.68	1	.455 Market S	. Ste. 600								
		s	an Francisco,	CA 94103								
8	PURPOSE	(a) (Category (See Category	tegories listed at the t	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Credit Card Se		,	,		_ `	outsi	de of Texas. Co	mplete Schedule	т.
	EVENDLICKE							Check if Austin	, TX,	officeholder livi	ng expense	
								Donation				
9	Complete ONLY if direct		andidate/Officeh	older name	C	Office souç	ght			Office	held	
	expenditure to benefit C/OI	H 										
	Date	F	ayee name									
	06/13/2024	2	2022 Block Inc									
	Amount (\$)	F	Payee address;	City;	State;	Zip Co	de					
	\$1.03	1	455 Market S	-		-						
		s	an Francisco,	CA 94103								
	PURPOSE	(a) C	Category (See Ca	tegories listed at the t	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	F	ees					-			omplete Schedule	т.
	Za Enditone							Check if Austin				
								Credit Card S	er\	rice Charg	е	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeh	older name	О	Office sou	ght			Office	held	
		_										
	Date	l	ayee name									
L	06/18/2024	2	2022 Block Inc				_					
	Amount (\$)	F	ayee address;	City;	State;	Zip Cod	de					
	\$2.93	1	.455 Market S	. Ste. 600								
		s	an Francisco,	CA 94103								
	PURPOSE	(a) (Category (See Ca	tegories listed at the t	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	F	ees					ш			omplete Schedule	т.
	_/, _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							Cradit Card C				
								Credit Card C	naر	rges for do	oriation	
	Commission ONU Wife allows	$\check{\Gamma}$	andidata (Office 1	aldau .aa		\ff:	a. la t			O#:-	h a l d	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		andidate/Officeh	oluer name	C	Office sou	ynt			Office	nela	
		•										

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 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 how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 3/7 Rpt: 12/16	Jefferson County Republican Party	00086977
4	Date	5 Payee name	·
	06/24/2024	2022 Block Inc	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$3.96	1455 Market St. Ste. 600	
		san Francisco, CA 94103	
8	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	Description Charlest travel outside of Tourse Complete Schoolule T
	EXPENDITURE	Donation	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Credit Card service fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	06/11/2024	CARR, DINA (Ms.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$88.82	2225 Stillwater Dr.	
		Beaumont, TX 77705	
	PURPOSE OF	,	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living expense
			Google
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	06/14/2024	City of Pt. Neches	
	Amount (\$) \$30.50	Payee address; City; State; Zip Code P.O. Box 758	
	φ30.30	F.O. BOX 736	
		Port Neches, TX 77651	
	PURPOSE		Description
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	, , , , , , , , , , , , , , , , , , , ,	Check if Austin, TX, officeholder living expense
			Water bill for satellite office in Pt. Neches
	Complete ONLY if divert	Candidata/Officeholder name	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
\vdash			

SCHEDULE F1

Vertising Expense Event Expense Loan Repayment/Reimbur

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/7 Rpt: 13/16	Jefferson County Republican Party 00086977
4	Date	5 Payee name
	06/05/2024	Entergy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$400.32	P. O. Box 8104
		New Orleans, LA 70891
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Electra Service Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Monthly bill
		Monthly Sill
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
\vdash	Date	Payee name
	06/12/2024	Evans, Joe (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$238.11	9235 Riggs St.
		Beaumont, TX 77707
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Google
		Coogic
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	05/21/2024	Interstate Office Park
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1844 IH10 South
	\$1,000.00	1044 IPIO 3000II
		Beaumont, TX 77707
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Monthly Rent
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								
_	Total manage Calculula E4.								
1	Total pages Schedule F1: Sch: 5/7 Rpt: 14/16	2 FILER NAME Jefferson County Republican Party 3 Filer ID (Ethics Commission Filers) 00086977							
4	Date	5 Payee name							
	06/24/2024	Interstate Office Park							
6	Amount (\$) \$350.00	7 Payee address; City; State; Zip Code 1844 IH10 South Beaumont, TX 77707							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Check if Austin, TX, officeholder living expense CAM (Common Area Maintenace Area) quarterly invoice							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	06/24/2024	Interstate Office Park							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$1,000.00	1844 IH10 South							
		Beaumont, TX 77707							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
EXPENDITURE		Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.							
		Check if Austin, TX, officeholder living expense							
	July Rent								
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									
	Date	Payee name							
	05/23/2024	J.S.Edwards & Sherlock							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$2,631.69	4155 Phelan Blvd.							
	Φ2,031.09	4133 Pilelali Bivu.							
		Beaumont, TX 11107							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Annual Insurance Check if travel outside of Texas. Complete Schedule T.							
Check if Austin, TX, officeholder living expense									
		Building Policy							
L									
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI	1							

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Frinting Expense Legal Services Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·									
	Sch: 6/7 Rpt: 15/16	Jefferson County Republican Party 00086977									
4	Date	5 Payee name									
	06/18/2024	SETXRW									
6	Amount (\$)	7 Payee address; City; State; Zip Code									
	\$25.00	P.O. Box 1071									
		Nederland, TX 77627									
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description									
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.									
	EXPENDITORE	Check if Austin, TX, officeholder living expense									
		Food ticket									
_	0 1 0 0 1 1 1 1										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held									
	•										
	Date	Payee name									
	06/06/2024	Spectrum									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$190.06	P.O. Box 60074									
		City of Industry, CA 91716-0074									
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description									
OF EXPENDITURE		Website / Internet Check if travel outside of Texas. Complete Schedule T.									
		Check if Austin, TX, officeholder living expense Monthly Bill									
		Worlding Dill									
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held									
	expenditure to benefit C/O										
	Data	Para and a second secon									
	Date 06/24/2024	Payee name Spectrum									
		Spectrum									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$80.41	P.O. Box 60074									
		City of Industry, CA 91716-0074									
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description									
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense									
		Website & internet bill for Pt, Neches Office									
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held									
	expenditure to benefit C/O	o									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

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 in District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	l Cor	mmittee	Legal Service	s ction Guide ex	Sa		ages/	Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2	FILER NAM	E						3	Filer ID	(Ethics Commission File	rs)
	Sch: 7/7 Rpt: 16/16		Jefferson C	County Rep	oublican Pa	rty					00086977		
4	Date	5	Payee name	!									
	06/24/2024		Spectrum										
	Amount (\$) \$89.36			0074 istry, CA 9	1716-0074	State; Z							
8	PURPOSE	(a)	Category (S				le)	(b)	Description				
	OF EXPENDITURE		Office Over	head/Ren	tal Expense)			_	el outside of Texas. Complete Schedule T.			
										stin, TX, officeholder living expense			
									Website & Int Bmt. Office	ern	et bill for		
9	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Off	iceholder na	ame	Offic	ce sougl	ht			Office he	eld	