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. 00031663 3 COMMITTEE NAME **OFFICE USE ONLY** Cooke County Republican Party (CEC) Date Received **ELECTRONICALLY FILED** 07/01/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 701 E. California, Ste. 304 Date Hand-delivered or Date Postmarked Change of Address Gainesville, TX 76240 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Mary NAME NICKNAME LAST **SUFFIX** Lewis STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 6087 FM 1201 STREET **ADDRESS** (Residence or Business) Gainesville, TX 76240 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 270 MAILING **ADDRESS** Lindsay, TX 76250 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (940) 665-0330 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** 01/01/2024 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

2 COMMITTEE NAME			13 File	er ID	(Ethics Commission Filers)
	Cooke County Republican Party (CEC) 000				,
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	I		
(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	PLEDGES, LOAN CONTRIBUTIONS	ED POLITICAL CONTRIBUTIONS (O'S, OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) ort qualifies for the higher itemization thresh	?	\$	2,501.60
		AL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES	OF LOANS)	\$	11,791.60
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITION	AL EXPENDITURES		\$	9,182.55
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT	. CONTRIBUTIONS MAINTAINED AS NG PERIOD	OF THE LAST DAY	\$	21,334.94
OUTSTANDING LOAN TOTALS		L AMOUNT OF ALL OUTSTANDING I E REPORTING PERIOD	LOANS AS OF THE	\$	0.00
6 AFFIDAVIT				<u> </u>	
			der penalty of perjury, the notation on Code.		
			Mrs. Mary Le	wis	
		-	Signature of Campaigr		er
AFFIX NOTARY	/ STAMP / SEAL ABOV	<u> </u>			
Sworn to and subscribed	d before me, by the said		, this the		day
of	_, 20, to certi	y which, witness my hand and seal of	office.		
Signature of officer ac	dministering oath	Printed name of officer administerin	g oath Titl	e of office	er administering oath

SUBTOTALS - CEC FORM CEC **COVER SHEET PG 3** 18 Filer ID **17** COMMITTEE NAME (Ethics Commission Filers) Cooke County Republican Party (CEC) 00031663 19 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 11,791.60 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 3. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 9,182.55 \$ 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 10. \$ TO FILER

	MONET	ARY POLITICAL CONTRIBUTION		LE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/3 Rpt: 4/19	
2	FILER NAME Cooke Coun	nty Republican Party (CEC)		3	Filer ID (Ethics Commission 00031663	on Filers)
4	Date 03/25/2024	5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$250.00
_		Denton, TX 76210				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/25/2024 CCRW Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
	Gainesville, TX 76240					
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/03/2024	Full name of contributor out-of-state PAC (ID#:_ David Spiller Campaign Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Jacksboro, TX 76458				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/03/2024	Full name of contributor out-of-state PAC (ID#:_ Dill, Gary (Mr.) Contributor address; City; State; Zip Code Gainesville, TX 76240)		Amount of Contribution (\$)	\$375.00
	Principal occu Construction	pation / Job title (See Instructions)	Employer (See Instructions Self-employed)		
	Date 02/15/2024	Full name of contributor out-of-state PAC (ID#:_ Drew Springer for Texas Contributor address; City; State; Zip Code Muenster, TX 76252			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTR		E A1			
	The Instruc	tion Guide explains how to comp	m.	1	Total pages Schedule A1: Sch: 2/3 Rpt: 5/19		
2	FILER NAME Cooke Count	y Republican Party (CEC)			3	Filer ID (Ethics Commission 00031663	n Filers)
4	Date 03/07/2024	Full name of contributor out-of-state PAC (ID#:) Hogan, Robert 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00	
_	Deireitade	Gainesville, TX 76240	la.	Faralassa (Osas kastasatisa			
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 04/10/2024 Jason Snuggs Campaign Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$375.00		
	Gainesville, TX 76240				<u></u>		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 04/10/2024 Knight, William Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$375.00	
		Gainesville, TX 76240					
	Principal occu _l Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 02/26/2024	Leach, Tyler				Amount of Contribution (\$)	\$470.00
	Principal occupation / Job title (See Instructions) None Given Employer (See Instructions)						
	Date 02/05/2024	Lesch, Pauline (Mrs.)				Amount of Contribution (\$)	\$500.00
	Principal occu retired	oation / Job title (See Instructions)		Employer (See Instructions retired	5)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 3/3 Rpt: 6/19		
2	FILER NAME Cooke Coun	nty Republican Party (CEC)		3	Filer ID (Ethics Commission 00031663	on Filers)
4	Date 02/26/2024	_ ·		7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Gainesville, TX 76240 upation / Job title (See Instructions)	9 Employer (See Instructions	;) 		
	retired		retired	·)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/05/2024 Marchant Good Goverernment Fund Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
	Principal occu	Carrollton, TX 75006 Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 04/10/2024	Full name of contributor out-of-state PAC (ID#:_ Tri Dal LLC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$850.00
		South Lake, TX 76092				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 02/12/2024	Full name of contributor out-of-state PAC (ID#:_ Womack, Richard Contributor address; City; State; Zip Code Valley View, TX 76272)		Amount of Contribution (\$)	\$1,095.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions Saulsbury Industries	5)		

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment			Legal Services		Salaries/W		e /Contract Labor		OTHER (enter	istrict a category not listed abov	re)
	Credit Card Payment			The Instruction G	uide explains ho	ow to con	nple	te this form.				
1	Total pages Schedule F1:	ı							3	Filer ID	(Ethics Commissio	n Filers)
	Sch: 1/13 Rpt: 7/19		Cooke Cour	ty Republican	Party (CEC)					00031663		
4	Date	5	Payee name									
	01/17/2024		Abba Wome	n's Center								
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Coo	de					
	\$500.00		214 North Ta	aylor								
			Gainesville,	TX 76240								
8	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sched	ule)	(b)	Description				
	OF EXPENDITURE		Contribution	s/Donations Ma	ade By			브			nplete Schedule T.	
	ZA ZADITORZ		Candidate/C	officeholder/Pol	itical Committ	tee		Check if Austin,		officeholder livin	g expense	
								Chantable Co	ווווו	ibution		
9	Complete ONLY if direct	<u> </u>	Candidata/Offic	oholdor nomo	Off	figo cour	aht			Office b	old	
9	Complete ONLY if direct expenditure to benefit C/OI		anuluale/Onic	eholder name	Oli	fice soug	JIII			Office h	leiu	
_		_										
	Date	ı	Payee name									
	06/07/2024	┡	Amazon Pay									
	Amount (\$)	ı	Payee addres	, ,,	State;	Zip Coo	de					
	\$105.64		PO Box 812	26								
			0	00400								
		⊢	Seattle, WA									
	PURPOSE OF			e Categories listed at t		ule)	(b)	Description	outoi.	do of Toyon Con	nalete Cabadule T	
	EXPENDITURE		Gift/Awards/	Memorials Exp	ense			=		officeholder livin	nplete Schedule T. g expense	
								Flags and La	pel	Pins		
	Complete ONLY if direct		Candidate/Offic	eholder name	Off	fice souç	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	06/07/2024		Amazon									
	Amount (\$)		Payee addres	s; City;	State;	Zip Cod	de					
	\$48.01		410 Terry Av	/e								
			Seattle, WA	98109								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sched	ule)	(b)	Description				
	OF EXPENDITURE			ead/Rental Ex		,		Check if travel			nplete Schedule T.	
	EXPENDITORE							ш	, TX,	officeholder livin	g expense	
								Copy Paper				
	Complete ONLY if divert	<u> </u>	Condidate (Offi	obolder neme	0"	fine esta	aht			Office !-	old	
	Complete ONLY if direct expenditure to benefit C/OI		anuuate/Offic	eholder name	Off	fice souç	JII			Office h	eiu	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
	Sch: 2/13 Rpt: 8/19	Cooke County Republican Party (CEC) 00031663			
4	Date	5 Payee name			
	04/06/2024	Bayers Bakery			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$183.54	824 Division			
		Muenster, TX 76525			
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 Food			
		1 000			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/Oh				
	Date	Payee name			
	06/10/2024	Cooke County VOAD			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$500.00	PO Box 208			
		Gainesville, TX 76240			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Contributions/Donations Made By			
		Candidate/Officeholder/Political Committee			
		Chantable Continuutions			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
_	Date	Davisa nama			
	04/06/2024	Payee name Dieter Brothers Restaurant			
	Amount (\$) \$710.39	Payee address; City; State; Zip Code 401 E. Hwy. 82			
	\$710.59	401 E. nwy. 62			
		Lindsay, TX 76250			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		Food			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held			
	experience to benefit O/O/I				

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 complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 3/13 Rpt: 9/19	Cooke County Republican Party (CEC) 00031663	
4	Date	5 Payee name	
	04/16/2024	Dollar Tree	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$6.77	2800 SH 121 #200	
		Euless, TX 76309	
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	
		Award Frames	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
Т	Date	Payee name	_
	02/14/2024	Dustin's Office Supply	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$32.04	105 E. California Street	
		Gainesville, TX 76240	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Office Overhead/Rental Expense	
	EXI ENDITORE	Check if Austin, TX, officeholder living expense office supplies	
		Office Supplies	
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
H	Date	Payee name	_
	03/07/2024	Engie Energy	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$64.75	P.O. Box 84160	
		Dallas, TX 75284-1680	
	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	
		Office Electricity	
L	Complete ONLY if alignet	Candidate/Officeholder name Office assists Office hold	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
_		· · · · · ·			
1	Total pages Schedule F1: Sch: 4/13 Rpt: 10/19	2 FILER NAME Cooke County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00031663		
1	Date				
4	05/14/2024	Payee name Engie Energy			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$65.17	P.O. Box 84160 Dallas, TX 75284-1680			
_	DUDDOOF				
8	PURPOSE OF EXPENDITURE	Chiec overhead/ tental Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense Sity		
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	06/10/2024	Engie Energy			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$19.20	P.O. Box 84160			
		Dallas, TX 75284-1680			
	PURPOSE OF EXPENDITURE	Office Overficad/Nertial Experise	outside of Texas. Complete Schedule T. TX, officeholder living expense City		
			200		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	04/06/2024	Fossil Pointe			
	Amount (\$) \$3,096.47	Payee address; City; State; Zip Code 7282 N. FM 51			
		Decataur, TX 76234			
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Event Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense SE		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held		
\Box	rme provided by Tayas E	nice Commission www.athics.state.tv.us	\/prcion \// 1 0 d278aha0		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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	
Sch: 5/13 Rpt: 11/19	Cooke County Republican Party (CEC) 00031663
4 Date 5	
05/03/2024	Fossil Pointe
6 Amount (\$) 7	Payee address; City; State; Zip Code
\$500.00	7282 N. FM 51
	Decataur, TX 76234
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.
LAFLINDITURE	Check if Austin, TX, officeholder living expense
	Venue Expense
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH	
Date	Payee name
06/10/2024	Gainesville Chamber of Commerce
Amount (\$)	Payee address; City; State; Zip Code
\$65.00	311 South Weaver
	Gainesville, TX 76240
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Depot Days Booth
	ρεμοι Days Βουιπ
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/07/2024	Grand Hyatt
	-
Amount (\$)	Payee address; City; State; Zip Code
\$782.10	600 E. Market St
	San Antonio, TX 78205
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Hotel Reservation for RPT Convention
	HOLE RESERVALION OF A CONVENTION
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH	Sanadad, Sinothologi Hamo

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Tatal manage Calculula E4.	· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 6/13 Rpt: 12/19	2 FILER NAME Cooke County Republican Party (CEC) 3 Filer ID (Ethics Commission Filers) 00031663
4	Date	5 Payee name
	01/17/2024	Kiwanis
6	Amount (\$) \$50.00	7 Payee address; City; State; Zip Code P.O. Box 335
		Gainesville, TX 76241
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Flag Program Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Flag Program
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/07/2024	Lyft
	Amount (\$)	Payee address; City; State; Zip Code
	\$53.39	185 Berry St. #5000
	Ψ33.33	165 Berry St. #3000
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		transportation to and from Airport for Convention
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/07/2024	McNamara, Chris
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	102 CR 2130
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		Gainesville, TX 76240-6338
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Miscellaneous office expense receipts
	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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

l	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: 7/13 Rpt: 13/19	Cooke County Republican Party (CEC) 00031663
4	Date	5 Payee name
	01/17/2024	Medal of Honor Host City Program
6	Amount (\$) \$100.00	7 Payee address; City; State; Zip Code P.O. Box 492 Gainesville, TX 76241
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charitable Contribution
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
L	04/16/2024	Mom's Donut Shop
	Amount (\$) \$127.84	Payee address; City; State; Zip Code 719 N. Grand Ave.
		Gainesville, TX 76240
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Convention Food
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/16/2024	Mom's Donut Shop
	Amount (\$) \$38.97	Payee address; City; State; Zip Code 719 N. Grand Ave.
		Gainesville, TX 76240
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Convention Expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

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 complete this form.
1	Total pages Schedule F1: Sch: 8/13 Rpt: 14/19	2 FILER NAME Cooke County Republican Party (CEC) 3 Filer ID (Ethics Commission Filers) 00031663
4	Date 01/10/2024	5 Payee name Nortex Communications
6	Amount (\$) \$91.43	7 Payee address; City; State; Zip Code 205 North Walnut Street
_	2112202	Muenster, TX 76252
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense website and phone
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 02/12/2024	Payee name Nortex Communications
	Amount (\$) \$91.43	Payee address; City; State; Zip Code 205 North Walnut Street
		Muenster, TX 76252
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense website and phone
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 03/11/2024	Payee name Nortex Communications
	Amount (\$) \$91.43	Payee address; City; State; Zip Code 205 North Walnut Street
		Muenster, TX 76252
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense website and phone
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAM	 F				3	Filer ID	(Ethics Commiss	sion Filers)	
	Sch: 9/13 Rpt: 15/19	1	- ınty Republican Par	ty (CEC)				00031663	•	,	
4	Date	5 Payee name)								
	04/10/2024		nmunications								
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip C	Code						
	\$106.31	205 North	Walnut Street								
		Muenster,	TX 76252								
8	PURPOSE OF	(a) Category (s	See Categories listed at the to	op of this schedule)	(b)	Description					
	EXPENDITURE	Office Ove	rhead/Rental Expen	ise		_		ide of Texas. Com , officeholder living			
						website and p			j experise		
						Woodie and p	,,,,	,,,,			
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office so	ught			Office he	eld		
	Date	Payee name	<u> </u>								
	05/10/2024	1 1	nmunications								
	Amount (\$)	Payee addre		State; Zip C	`odo						
	\$91.31	l -	Walnut Street	State, Zip C	Joue						
	Ψ91.31	203 North	Wallut Street								
		Muenster,	TX 76252								
	PURPOSE	(a) Category (S	See Categories listed at the to	pp of this schedule)	(b)	Description					
	OF EXPENDITURE	Office Ove	rhead/Rental Expen	ise				ide of Texas. Com			
						—		, officeholder living	j expense		
						website and p	JIIC	ne			
	2				<u> </u>						
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office so	ought			Office he	eld		
	Date	Payee name									
	06/10/2024	Nortex Cor	nmunications								
	Amount (\$)	Payee addre	ess; City;	State; Zip C	Code						
	\$91.31	205 North	Walnut Street	, ,							
	**										
		Muenster,	TX 76252		_						
	PURPOSE	(a) Category (S	See Categories listed at the to	op of this schedule)	(b)	Description	_				
	OF EXPENDITURE	Office Ove	rhead/Rental Expen	ise				ide of Texas. Com			
								, officeholder living	j expense		
						website and p	JIIC	л С			
	Occupation Children	0 111 - 15			<u> </u>			000	-1-1		
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office so	ought			Office he	eia		
_											

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 10/13 Rpt: 16/19	Cooke County Republican Party (CEC)	00031663					
4	Date	5 Payee name						
	06/07/2024	Pizza Hut						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$49.74	738 N. Grand Ave.						
		Gainesville, TX 76240						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description					
	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.					
			Check if Austin, TX, officeholder living expense Pizza for CEC Meeting					
			Fizza for CEC Meeting					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
"	expenditure to benefit C/O		Office field					
_	Data							
	Date 04/10/2024	Payee name						
		Raise the Money						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$47.05	801 E. California St.						
		Gainesville, TX 76240						
	PURPOSE OF	- (Description					
	EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
			Bank Charges					
			Š					
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit C/OH							
	Date	Payee name						
	04/16/2024	Sam's Club						
	Amount (\$) Payee address; City; State; Zip Code							
	\$27.09	2850 W. University						
		ŕ						
Denton, TX 76201								
	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					
			Plates and water					
		I						
_	Complete ONLY if direct	Candidate/Officeholder name Office cought	Office hold					
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
			Office held					
			Office held					

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 complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 11/13 Rpt: 17/19 Cooke County Republican Party (CEC) 00031663 4 Date Payee name 04/16/2024 Sam's Club 6 Amount (\$) Payee address; State; Zip Code \$46.46 2850 W. University Denton, TX 76201 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Convention Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/18/2024 Signs for Less Amount (\$) Payee address; City; State; Zip Code \$21.65 306 North Grand Avenue Gainesville, TX 76240 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Theck if Austin, TX, officeholder living expense Signs Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/07/2024 Southwest Airlines Amount (\$) Payee address: City; State; Zip Code \$209.96 2072 Love Field Dallas, TX 75235 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Airfare to the RPT Convention Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1 Total pages Schedule F1:	,					
1 Total pages Schedule F1: Sch: 12/13 Rpt: 18/19	Cooke County Republican Party (CEC) Cooke County Republican Party (CEC) Cooke County Republican Party (CEC)					
4 Date	5 Payee name					
02/14/2024	Texas Star Embroidery					
6 Amount (\$) \$648.00	7 Payee address; City; State; Zip Code 402 S Lindsay St GAINESVILLE, TX 76240					
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 BYOG Caps					
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
04/16/2024	USPS					
Amount (\$)	Payee address; City; State; Zip Code					
\$68.00 321 E. California St.						
PUPPOS	Gainesville, TX 76241					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense postage					
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
Date	Payee name					
04/16/2024	Walmart					
Amount (\$)	Payee address; City; State; Zip Code					
\$10.76 1800 Lawrence St						
	Gainesville, TX 76240					
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					

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		· ·	Fees Office Overhead/Rental Ex Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			Travel in District Travel Out of Dis	quipment & Related Expense	
1 Total pages Schedule F1: 2			FILER NAME			3	Filer ID	(Ethics Commission Filers)	
	Sch: 13/13 Rpt: 19/19	ı	Cooke County Republican Party (CEC)				00031663	,	
4	Date	5	Payee name						
	04/16/2024		Walmart						
6	Amount (\$) \$49.45		Payee address; City; State; 1800 Lawrence St Gainesville, TX 76240	Zip Code					
8	PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense convention expense						
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeholder name Of	ffice sought			Office he	ld	
	Date		Payee name						
	04/16/2024		Walmart						
	Amount (\$) \$91.89	l	Payee address; City; State; 1800 Lawrence St	Zip Code					
			Gainesville, TX 76240						
PURPOSE OF EXPENDITURE			Check if A			n avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense on Expense			
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeholder name Of	ffice sought			Office he	ld	