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) 00086037 3 COMMITTEE NAME **OFFICE USE ONLY Bastrop County Conservatives** Date Received **ELECTRONICALLY FILED** 07/10/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 906 Main Street, Box 157 Date Hand-delivered or Date Postmarked Change of Address Bastrop, TX 78602 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. L. Melvin NAME NICKNAME LAST **SUFFIX** Cooper STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 906 Main Street, Box 157 STREET **ADDRESS** (Residence or Business) Bastrop, TX 78602 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 906 Main Street, Box 157 MAILING **ADDRESS** Bastrop, TX 78602 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (832) 603-7150 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer 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**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Bastrop County Cons	servatives		00086037	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. William Satterfield Bastrop	Central Appr	aisal District
(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, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,937.69
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	3,002.54
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	19,249.90
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT	•		•	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Mr. L. Mel	vin Cooper	
		Signature of Car	npaign Treasur	rer
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ed before me, by the said _	, th	is the	day
		which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of office	er administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 3 of 20

12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Bastrop County Conservatives					00086037
14	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mrs. Michelle Gaertner Bastrop	
	(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		
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mrs. Carol Armstrong Bastrop Ir	ndependent School District
	(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.)		Mr. Jimmy Crouch City of Bastro	pp
	(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.)			

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 4 of 20

						1 ago 1 01 20
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Bastrop County Conser	vatives				00086037	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mr. Casey Hanchey S	Smithville Ir	ndependent Sc	hool District
(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	1. Candidates (Identify by name or, if applicable, classify by party.)		Mr. Brandon Dunham	City of Sm	nithville	
(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	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mrs. Tracy Norris-San	nuels Elgir	Independent S	School District
(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.)					

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC **ADDENDUM**

COMMITTEE NAME				
				13 Filer ID (Ethics Commission Filers)
Bastrop County Conser	vatives			00086037
	1. Candidates (Identify by name or, if applicable, classify by party.)		Ms. Dominica McGinnis Bastrop	County Commissioner
aper to complete this		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.)			
OMMITTEE	1 Candidates	A Supported		
	(Identify by name or, if			
paper to complete this		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted		Mr. Zachary Carter Bastrop Cou	unty Justice of the Peace
	applicable, classify by party.)			
	COMMITTEE ACTIVITY Attach lists on plain paper to complete this peport if necessary.) COMMITTEE ACTIVITY Attach lists on plain paper to complete this paper to complete this paper to report if necessary.)	Attach lists on plain 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.) 2. Measures (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.)	Attach lists on plain paper to complete this eport if necessary.) 2. Measures (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.) COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) Attach lists on plain paper to complete this eport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed A. Supported B. Opposed	A. Supported Ms. Dominica McGinnis Bastrop (Identify by name or, if applicable, classify by party.) A. Supported Ms. Dominica McGinnis Bastrop Ms. Doposed B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed A. Supported Mr. Zachary Carter Bastrop Council Ms. Zachary Carter Ba

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			6 of 20
17 COMMITT Bastrop (EE NAME County Conservatives	18 Filer ID 00086037	(Ethics Commission Filers)
	E SUBTOTALS		
NAME OF	SCHEDULE		SUBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 1,937.69
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 CORPORAL LABOR 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.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 3,002.54
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 C	ONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/5 Rpt: 7/20	
2	FILER NAME Bastrop Cou	nty Conservatives			3	Filer ID (Ethics Commission 00086037	n Filers)
4	Date 06/17/2024	5 Full name of contributor [Able, Jerry (Mr.)6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$232.26
		Elgin, TX 78621					
8	Principal occu Retired	pation / Job title (See Instructions)	!	9 Employer (See Instructions	s)		
	Date 06/07/2024	Full name of contributor Alexander, Charity Contributor address; City; Sta)	•	Amount of Contribution (\$)	\$116.29
	Dringing aggr	Bastrop, TX 78602 pation / Job title (See Instructions)		Employer (See Instructions	<u></u>		
		nagement & Leasing		Employer (See Instructions Self	o)		
	Date 06/20/2024	Full name of contributor [Barron, Donald (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$21.40
		Bastrop, TX 78602					
	Principal occu Home Builde	pation / Job title (See Instructions) er		Employer (See Instructions Self	s)		
	Date 05/21/2024	Full name of contributor Barron, Donald (Mr.) Contributor address; City; Sta Bastrop, TX 78602				Amount of Contribution (\$)	\$21.40
	Principal occu Home Builde	pation / Job title (See Instructions)		Employer (See Instructions Self	<u>s)</u>		
	Date 05/22/2024	Full name of contributor Carter, Zachary Contributor address; City; Sta Paige, TX 78659				Amount of Contribution (\$)	\$208.54
		pation / Job title (See Instructions) e Peace, Pct 2		Employer (See Instructions Bastrop County	5)		
			I				

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 2/5 Rpt: 8/20	
2	FILER NAME Bastrop Cou	nty Conservatives			3	Filer ID (Ethics Commission 00086037	n Filers)
4	Date 06/26/2024	5 Full name of contributor Clardy, Clyde (Mr.)6 Contributor address; City; State	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$40.00
_	Deireitade	Bastrop, TX 78602	- Io	Frankrik (Ozakaski sa			
8	Construction	pation / Job title (See Instructions)	9	Employer (See Instructions Self	5)		
	Date 05/24/2024	Full name of contributor Clardy, Clyde (Mr.) Contributor address; City; State				Amount of Contribution (\$)	\$40.00
	Deinsinal assu	Bastrop, TX 78602		Franksian (Caa Instructions	_		
	Construction	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 05/20/2024	Full name of contributor Cook, William R Contributor address; City; State	out-of-state PAC (ID#: ; Zip Code)		Amount of Contribution (\$)	\$232.26
		Bastrop, TX 78602					
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 06/20/2024	Full name of contributor Coon, Steve Contributor address; City; State	out-of-state PAC (ID#:; Zip Code)		Amount of Contribution (\$)	\$10.86
	Principal occu Retired	Bastrop, TX 78602 pation / Job title (See Instructions)		Employer (See Instructions	<u>;</u>)		
	Date 06/21/2024	Full name of contributor Cooper, L. Melvin (Mr.) Contributor address; City; State Bastrop, TX 78602				Amount of Contribution (\$)	\$10.86
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	■ A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/5 Rpt: 9/20	
2	FILER NAME Bastrop Cou	ınty Conservatives		3	Filer ID (Ethics Commission 00086037	ı Filers)
4	Date 05/22/2024	5 Full name of contributor out-of-state PAC (ID#:_ Cooper, L. Melvin (Mr.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$10.86
_		Bastrop, TX 78602				
8	Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 06/21/2024	Full name of contributor out-of-state PAC (ID#:_ Cooper, Linda (Mrs.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.86
	Principal occu	Bastrop, TX 78602 upation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 05/22/2024	Full name of contributor out-of-state PAC (ID#:_ Cooper, Linda (Mrs.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.86
	Dringinal occu	Bastrop, TX 78602 upation / Job title (See Instructions)	Employer (See Instructions			
	Retired	pation 7 300 title (See instructions)	Retired	<i>,</i>		
	Date 06/12/2024	Full name of contributor out-of-state PAC (ID#:_ Cunningham, Robert (Mr.) Contributor address; City; State; Zip Code Cedar Creek, TX 78612			Amount of Contribution (\$)	\$42.49
		pation / Job title (See Instructions) at Consultant	Employer (See Instructions Self)		
	Date 06/11/2024	Full name of contributor out-of-state PAC (ID#:_Gober, Billy Contributor address; City; State; Zip Code Smithville, TX 78957			Amount of Contribution (\$)	\$16.13
	Principal occu Real Estate	ipation / Job title (See Instructions)	Employer (See Instructions Self)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/5 Rpt: 10/20	
2	FILER NAME Bastrop Cou	inty Conservatives		3	Filer ID (Ethics Commission 00086037	n Filers)
4	Date 06/26/2024	5 Full name of contributor out-of-state PAC (ID#:_ Harrod, Deborah 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$116.29
_	<u> </u>	Elgin, TX 78621				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 06/26/2024	Full name of contributor out-of-state PAC (ID#:_ Harrod, Steve (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$116.29
	Deinainal assu	Elgin, TX 78621	Frankrian (Coo Instructions			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/24/2024	Full name of contributor out-of-state PAC (ID#:_ Hill, Manfred (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$232.26
		Smithville, TX 78957				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions) Retired)		
	Date 06/28/2024	Full name of contributor out-of-state PAC (ID#:_ Honeycutt, Scarlet Contributor address; City; State; Zip Code Cedar Creek, TX 78612)		Amount of Contribution (\$)	\$42.49
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 05/30/2024	Full name of contributor out-of-state PAC (ID#:_ Honeycutt, Scarlet Contributor address; City; State; Zip Code Cedar Creek, TX 78612			Amount of Contribution (\$)	\$42.49
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDULE	■ A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/5 Rpt: 11/20	
2	FILER NAME Bastrop Cou	nty Conservatives		3	Filer ID (Ethics Commission 00086037	Filers)
4	Date 05/22/2024	5 Full name of contributor out-of-state PAC (ID#: McGinnis, Dominica (Ms.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$300.00
_	Dringing Lagra	Bastrop, TX 78602	O Familia var (Cara Instructions	<u></u>		
0		pation / Job title (See Instructions) purces Consultant	9 Employer (See Instructions Self	·)		
	Date 06/11/2024	Full name of contributor out-of-state PAC (ID#:_ McMahen, Dixon (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
		Bastrop, TX 78602				
	Principal occu Construction	pation / Job title (See Instructions)	Employer (See Instructions Self	5)		
	Date 06/17/2024	Full name of contributor out-of-state PAC (ID#: Nelson, Jim (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$21.40
		Smithville, TX 78957				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	s)		
	Date 06/20/2024	Full name of contributor out-of-state PAC (ID#:_ Prokop Sr., Michael (Mr.) Contributor address; City; State; Zip Code Bastrop, TX 78602)		Amount of Contribution (\$)	\$21.40
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		

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

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: 1/9 Rpt: 12/20	Bastrop County Conservatives 00086037	
4 Date	5 Payee name	
06/11/2024	ActiveCampaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$31.10	1 North Dearborn Street	
— Forest diture from	Fifth Floor	
Expenditure from corporate funds	Chicago, IL 60602	
8 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	
	PAC expense for email application	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
06/11/2024	Bartsch, Mary (Mrs.)	
Amount (\$)	Payee address; City; State; Zip Code	
\$112.00	3733 FM 535	
Expenditure from corporate funds	Red Rock, TX 78662	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Logo'd shirts for PAC	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	1	
Date	Payee name	
06/11/2024	Bastrop Chamber of Commerce	
Amount (\$)	Payee address; City; State; Zip Code	
\$150.00	927 Main Street	
Expenditure from corporate funds	Bastrop, TX 78612	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Event Expense	
	Check if Austin, TX, officeholder living expense	
	Supplies for PAC fundraiser	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
Complete <u>ONLY</u> if direct 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 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 co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/9 Rpt: 13/20	Bastrop County Conservatives	00086037
4 Date	5 Payee name	
06/24/2024	CloudFlare	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$78.16	405 Comal Road	
Expenditure from corporate funds	Austin, TX 78702	
8 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
		PAC expense for email hosting
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O	н	
Date	Payee name	
05/20/2024	CloudFlare	
Amount (\$)	Payee address; City; State; Zip Co	de
\$10.11	405 Comal Road	
Expenditure from corporate funds	Austin, TX 78702	
PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	(b) Description
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		PAC expense for email hosting
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office south	ght Office held
Date	Payee name	
05/23/2024	G&C Printing	
Amount (\$)	Payee address; City; State; Zip Co	de
\$65.07	449 Goertz Drive	
Expenditure from corporate funds	Red Rock, TX 78662	
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
		PAC business cards
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O	Н	

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)

Credit Card F dyment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/9 Rpt: 14/20	Bastrop County Conservatives	00086037
4 Date	5 Payee name	I
06/17/2024	GoDaddy	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$9.58	2155 E. GoDaddy Way	
Expenditure from corporate funds	Tempe, AZ 85284	
8 PURPOSE	•	(b) Description
OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Cinico Gvernodari tenda Expense	Check if Austin, TX, officeholder living expense
		PAC expense for email hosting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
experialitate to beliefit 6/01	<u> </u>	
Date	Payee name	
06/10/2024	GoDaddy	
Amount (\$)	Payee address; City; State; Zip Co	de
\$36.22	2155 E. GoDaddy Way	
Expenditure from corporate funds	Tempe, AZ 85284	
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.
EXPENDITORE	·	Check if Austin, TX, officeholder living expense
		PAC expense for email hosting
0 1 0 0 1 0 0		0" 111
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
·		
Date	Payee name	
06/03/2024	GoDaddy	
Amount (\$)	Payee address; City; State; Zip Co	de
\$25.56	2155 E. GoDaddy Way	
Expenditure from		
corporate funds	Tempe, AZ 85284	
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
		PAC expense for email hosting
Complete CNII V if direct	Candidate/Officeholder name Office sou	office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ght Office held

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	
1 Total pages Cabadula F1:	2 Files ID (Ethics Commission Files)
1 Total pages Schedule F1: Sch: 4/9 Rpt: 15/20	2 FILER NAME Bastrop County Conservatives 3 Filer ID (Ethics Commission Filers) 00086037
4 Date	5 Payee name
06/03/2024	GoDaddy
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25.56	2155 E. GoDaddy Way
Expenditure from	Tompo A7 05204
corporate funds	Tempe, AZ 85284
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
2/1 2/13/13/12	Check if Austin, TX, officeholder living expense
	PAC expense for email hosting
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/29/2024	GoDaddy
Amount (¢)	
Amount (\$)	
\$11.72	2155 E. GoDaddy Way
Expenditure from corporate funds	Tempe, AZ 85284
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
	PAC expense for email hosting
	The opposed of animal recurry
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/03/2024	Google
Amount (\$)	Payee address; City; State; Zip Code
\$2.48	935 East Meadow Drive
Expenditure from corporate funds	Palo Alto, CA 94303
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	PAC expense for shared workspace
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/9 Rpt: 16/20	Bastrop County Conservatives 00086037
4 Date	5 Payee name
06/17/2024	HostGator
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$23.47	5005 MitchellDale
	Suite 100
Expenditure from corporate funds	Houston, TX 77092
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	PAC expense for website hosting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/20/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$31.62	2700 Coast Avenue
Expenditure from	
corporate funds	Mountain View, CA 74043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	PAC bookkeeping software
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	o
Data	
Date 06/21/2024	Payee name Mailchimp
	· · · · · · · · · · · · · · · · · · ·
Amount (\$)	Payee address; City; State; Zip Code
\$63.24	405 N Angier Ave. NE.
Expenditure from	All 14 O A 20000
corporate funds	Atlanta, GA 30308
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Pental Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	PAC expense for email service
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

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

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: 6/9 Rpt: 17/20	Bastrop County Conservatives 00086037	
4 Date	5 Payee name	
06/13/2024	Mailchimp	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$42.16	405 N Angier Ave. NE.	
- "		
Expenditure from corporate funds	Atlanta, GA 30308	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	
	Check if Austin, TX, officeholder living expense	
	PAC expense for email service	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experiolitile to belieff C/OI	1	
Date	Payee name	
05/20/2024	Mailchimp	
Amount (\$)	Payee address; City; State; Zip Code	-
\$110.14	405 N Angier Ave. NE.	
Ψ110.14	400 N Anglet Ave. NE.	
Expenditure from	All	
corporate funds	Atlanta, GA 30308	
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	
	PAC expense for email service	
0 1 0 0 1 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0		_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experiantare to serionic eye.		
Date	Payee name	
06/20/2024	Peerly.com	
Amount (\$)	Payee address; City; State; Zip Code	_
\$1,029.97	2232 Dell Range Road	
. ,		
Expenditure from	Cheyenne, WY 82009-4941	
corporate funds		_
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	
	PAC expense for texting service	
	1 //O expense for texting service	
Complete CNII V if direct	Candidate/Officeholder name Office cought Office hold	4
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
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		_

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)

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 7/9 Rpt: 18/20	Bastrop County Conservatives	00086037
4 Date	5 Payee name	-
05/20/2024	Peerly.com	
6 Amount (\$) \$579.34	7 Payee address; City; State; Zip C2232 Dell Range Blvd	ode
Expenditure from corporate funds	Cheyenne, WY 82009-4941	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PAC expense for texting service
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught Office held Central Appraisal District None
Date	Payee name (see previous)	
Amount (\$)	Payee address; City; State; Zip C	ode
Expenditure from corporate funds PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so Gaertner, Michelle (Mrs.) Bastrop	ught Office held Central Appraisal District None
Date	Payee name (see previous)	
Amount (\$)	Payee address; City; State; Zip C	ode
Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soll H Armstrong, Carol (Mrs.) Bastrop	ught Office held Independent School None

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	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: 8/9 Rpt: 19/20	Bastrop County Conservatives 00086037
4 Date	5 Payee name
	(see previous)
6 Amount (\$)	7 Payee address; City; State; Zip Code
,	
Expenditure from corporate funds	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Crouch, Jimmy (Mr.) City of Bastrop Place Bastrop None
Date	Payee name
Dato	(see previous)
Amount (\$)	Payee address; City; State; Zip Code
- Funanditura from	
Expenditure from corporate funds	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Hanchey, Casey (Mr.) Smithville Independent None
Data	
Date	Payee name
	(see previous)
Amount (\$)	Payee address; City; State; Zip Code
Expenditure from corporate funds	
•	(b) Cotomore
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Zaa, Z.aa ()	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Operations Made By -

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	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: 9/9 Rpt: 20/20	Bastrop County Conservatives 00086037
4 Date	5 Payee name
	(see previous)
6 Amount (\$)	7 Payee address; City; State; Zip Code
Expenditure from corporate funds	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitire to beliefit C/OI	Norris-Samuels, Tracy (Mrs.) Elgin Independent School District None
Date	Payee name
05/20/2024	Peerly.com
Amount (\$)	Payee address; City; State; Zip Code
\$450.63	2232 Dell Range Blvd
Expenditure from corporate funds	Cheyenne, WY 82009-4941
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
_/	Check if Austin, TX, officeholder living expense
	PAC in-kind expense for texting service
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
'	
Date	Payee name
06/30/2024	Stripe
Amount (\$)	Payee address; City; State; Zip Code
\$114.41	354 Oyster Point Blvd South
Expenditure from corporate funds	San Fancisco, CA 94080-1912
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.
LAFLINDITURE	Check if Austin, TX, officeholder living expense
	Fees incurred by the PAC for donations by credit card
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Oxponditure to bottom Orott	
1	