#### 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. 00055976 3 COMMITTEE NAME **OFFICE USE ONLY** Austin County Republican Party (CEC) Date Received **ELECTRONICALLY FILED** 07/12/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 9510 FM 949 Date Hand-delivered or Date Postmarked Change of Address Cat Spring, TX 78933 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Charles NAME NICKNAME LAST **SUFFIX** Chuck **Beers** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 9510 FM 949 STREET **ADDRESS** (Residence or Business) Cat Spring, TX 78933 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 9510 FM 949 MAILING **ADDRESS** Catspring, TX 78933 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (979) 885-9523 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 11/05/2024 χ 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)
Austin County Republican F	Party (CEC)		000559	76
ACTIVITY (Ide	Candidates ntify by name or, if licable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
(Des loca	Measures scribe by date and tion of election and tire of issue.)	A. Supported		
		B. Opposed		
(Ide	Officeholders Assisted ntify by name or, if licable, classify by party.)			
TOTALS	PLEDGES, LOANS CONTRIBUTIONS check here if this repo	ED POLITICAL CONTRIBUTIONS (OTHER THAN S, OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) ort qualifies for the higher itemization threshold	\$	0.00
2.		CAL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE 3. TOTALS	TOTAL UNITEMIZ	ED POLITICAL EXPENDITURES	\$	0.00
4.	TOTAL POLITIC	CAL EXPENDITURES	\$	5,055.26
I	TOTAL POLITICAL OF THE REPORTI	L CONTRIBUTIONS MAINTAINED AS OF THE LAST ING PERIOD	DAY \$	16,637.90
		L AMOUNT OF ALL OUTSTANDING LOANS AS OF T E REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Cha	rles Beers	
		Signature of Ca		asurer
AFFIX NOTARY STA	AMP / SEAL ABOVE	<b>≡</b>		
Sworn to and subscribed befo	ore me, by the said	, t	his the	day
		y which, witness my hand and seal of office.		
Signature of officer adminis	stering oath	Printed name of officer administering oath	Title of o	officer administering oath

### **SUBTOTALS - CEC**

### FORM CEC COVER SHEET PG 3 3 of 8

				3 of 8				
17 COMMITTE	EE NAME	18 Filer ID	(Ethics Com	mission Filers)				
Austin Co	unty Republican Party (CEC)	00055976						
	19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE							
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00				
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00				
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00				
4. X	SCHEDULE E: LOANS		\$	0.00				
5. X	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS							
6. X	6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS							
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
8. X	8. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD							
9.	9. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS							
10.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$					

PLE	DGED CONTRIBUTIONS		SCHEDULE B
Т	he Instruction Guide explains how to con	nplete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/8
2 FILER N	AME		3 Filer ID (Ethics Commission Filers)
Austin C	County Republican Party (CEC)		00055976
4 TOTAL	OF UNITEMIZED PLEDGES		\$ 0.0
<b>5</b> Date	6 Full name of pledgor out-of-state PAC	(ID#:	8 Amount of 9 In-kind description pledge (\$) (If applicable)
	7 Pledgor Address; City; State; Zip C	Code	(   applicable)
			Check if travel outside of Texas. Complete Schedul
10 Principal	occupation / Job title (See Instructions)	11 Employer (See In	structions)

	LOANS					SCHEDU	LE <b>E</b>
	The Instruction	on Guide explains ho	1 Total pages Schedule E: Sch: 1/1 Rpt: 5/8				
2	FILER NAME Austin County R	epublican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00055976			
4	TOTAL OF UN	IITEMIZED LOANS			1	\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)	
6	Is lender a financial institution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12	Principal occupation	on / Job title (See Instruction	ns)	13 Employer (See Instructio	ns)		
14	Description of Coll None	ateral		15 Check if personal funds v	vere deposite	d into political account (See Instructions)	)
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guarante	eed (\$)
	not applicable	18 Guarantor address;	City; State;	Zip Code			
20	Principal occupation	on		21 Employer (See Instruction	ns)	1	

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

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

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 complete this fo	rm.						
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 1/3 Rpt: 6/8	Austin County Republican Party (CEC)	00055976						
4	Date	5 Payee name	•						
	05/28/2024	Beers, Melody							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$782.10	9510 FM 949							
		Cat Spring, TX 78933							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descript	ion						
	OF		if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check	Check if Austin, TX, officeholder living expense						
		reimbu	rse hotel for convention						
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held						
	expenditure to benefit Groi	'							
	Date	Payee name							
	06/10/2024	City of Bellville							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$108.59	30 South Holland St							
		Bellville, TX 77418							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descript	ion						
	OF EXPENDITURE	Office Overhead/Rental Expense	if travel outside of Texas. Complete Schedule T.						
	LXI LINDITORL		if Austin, TX, officeholder living expense						
		June ut	illues						
_	Computate ONLY if diseast	Condidate/Officeholder neme	Office heald						
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	06/03/2024	City of Bellville							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$73.08	30 South Holland St							
		Bellville, TX 77418							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descript	ion						
	OF EXPENDITURE	Office Overhead/Nertial Expense   L	if travel outside of Texas. Complete Schedule T.						
	-	│ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │	if Austin, TX, officeholder living expense						
		June at	inuco						
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held						
	expenditure to benefit C/OI		Office field						

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officenoider/Politica 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: 2/3 Rpt: 7/8	Austin County Republican Party (CEC) 00055976
4	Date	5 Payee name
	06/06/2024	Crawley, Rylan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	1003 Eagle Lake Rd
	1	
		Sealy, TX 77474
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	!	Essay contest winner, Sealy
	1	250dy contest million, cody
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
5	expenditure to benefit C/O	
_	Data	B
	Date 06/15/2024	Payee name  Hometown Hardware Bellville
	Amount (\$)	Payee address; City; State; Zip Code
	\$52.29	
	!	
		Bellville, TX 77418
	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.
	<b>-</b> /4: -::-::::	Check if Austin, TX, officeholder living expense silicon, faucets, misc hardware, missing reciepts
	!	Silicon, laucets, misc matuwate, missing reciepts
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	06/15/2024	Phenix Knives
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,039.20	305 E Main
	!	
	1	Bellville, TX 77418
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
	!	purchase of knife for live auction
	0 1: 0.11.7.7.1.	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal 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
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gilt/Awards/Memorials i Legal Services <b>The Instruction Gu</b>			ages	/Contract Labor		OTHER (enter	a category not listed above)	
		_		The instruction Gu	ue explains in	OW IO COI	iipie	te tilis loilli.				
1	Total pages Schedule F1:	2								Filer ID	(Ethics Commission Filers	s)
	Sch: 3/3 Rpt: 8/8			ty Republican P	arty (CEC)					00055976		
4	Date	5	Payee name									
	06/12/2024		Pinteralli, Er	ic								
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Cod	de					
	\$1,000.00		2258 Green	Meadows Dr								
			Sealy, TX 77	7474								
8	PURPOSE	(a)		e Categories listed at th	e ton of this scher	dule)	(b)	Description				
	OF	l` <i>′</i>		Memorials Expe		duic)	. ,		outsio	de of Texas. Cor	mplete Schedule T.	
	EXPENDITURE		Cirar Waracr	ιποιποπαίο Εχρο	7100			Check if Austin,	TX,	officeholder livir	g expense	
								aid to attend I	Nat	ional Conv	ention as Delegate	
9	Complete ONLY if direct		Candidate/Offic	eholder name	Of	fice soug	ght			Office h	ield	
	expenditure to benefit C/OI	1										
	Date		Payee name	<del>-</del>								
	06/24/2024		Webb, Reist	er								
	Amount (\$)		Payee addres	s; City;	State;	Zip Coo	de					
	\$1,000.00		116 Briarwo	od								
			Sulphur Spri	ngs, TX 75482								
	PURPOSE	(a)	Category (Se	e Categories listed at th	e top of this sched	dule)	(b)	Description				
	OF EXPENDITURE		Gift/Awards/	Memorials Expe	ense			<u></u>			nplete Schedule T.	
	LA LIBITORE							<b>—</b>		officeholder livir		
								Essay contes	t H	ome Schoo	ol winner	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	Of	fice soug	ght			Office h	ield	