### COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM CEC COVER SHEET PG 1

Th	e CEC Instruction G	uide explains how to complete this form.		1 Filer ID <sup>(Eth</sup> 00086977	iics Commission F	ilers)	2 Total pages 55	filed:	
3	COMMITTEE NAME						OFFICE		NLY
	Jefferson County F	Republican Party					Date Received		
							ELECTRONI 09/28/2024	CALLY F	ILED
4	COMMITTEE ADDRESS		CITY	; STATE;	; ZIP (	CODE			
	ADDITESS	148 South Dowlen Rd.					Date Hand-delivered	d or Date Pos	stmarked
	Change of Address	#627							
		Beaumont, TX 77707					Receipt #	Amour	nt
							Date Processed		
							Date Imaged		
							Bato magoa		
5	CAMPAIGN	MS / MRS / MR FIRST				I	MI		
	TREASURER NAME	Ms. Patricia							
		NICKNAME LAST					SUFFIX		
		Greene							
L									
6	CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE	=);	APT /	/ SUITE #;	CITY;	S	TATE;	ZIP CODE
	STREET	4400 Morning Star Pl.							
	ADDRESS								
	(Residence or Business)	Beaumont, TX 77705							
7	CAMPAIGN TREASURER	STREET OR PO BOX;		APT	ſ / SUITE #;	CITY;	:	STATE;	ZIP CODE
	MAILING	4400 Morning Star Pl.							
	ADDRESS								
	Change of Address	Beaumont, TX 77705							
8	CAMPAIGN	AREA CODE PHONE NUMBER	E	XTENSION					
	TREASURER PHONE	(409) 626-2585							
	THOME								
9	REPORT TYPE	January 15	30tl	n day before electio	on		Final Report		
			8th	day before electior	n		10th day after o	campaign tr	reasurer
		July 15	<b>D</b>	off			termination		
		—	Rur	1011					
10	PERIOD	Month Day Year			Month	Day	Year		
	COVERED	07/01/2024	TH	ROUGH	09	/26/2024			
11	ELECTION	ELECTION DATE Month Day Year	Dri	mary	ELECTION T	IYPE	Other		
		11/05/2024		-					
			K Ge	eneral	Special				
		60	о т <i>и</i>	O PAGE 2					
							11-	010-014	
⊢0	ins provided by Tex	ms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.48da51f7						1.0.480a511/	

## COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer	ID	(Ethics Commission Filers)		
Jefferson County Reput	olican Party		0008	6977			
14 COMMITTEE ACTIVITY	1. 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	ED POLITICAL CONTRIBUTIONS (OTHER THAN S, OR GUARANTEES OF LOANS, OR B MADE ELECTRONICALLY) ort qualifies for the higher itemization threshold		\$	0.00		
		CAL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	7,144.28		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICAL EXPENDITURES		\$	0.00		
	4. TOTAL POLITIC	CAL EXPENDITURES		\$	11,338.62		
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT	L CONTRIBUTIONS MAINTAINED AS OF THE LAST ING PERIOD	DAY	\$	192,802.06		
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 inforr under Title 15, Election Code.					
		Ms. Patric					
		Signature of Car	mpaign I	reasure	15		
AFFIX NOTARY	AFFIX NOTARY STAMP / SEAL ABOVE						
		, tł	nis the		day		
of	of, 20, to certify which, witness my hand and seal of office.						
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title	of office	er administering oath		
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us			Version V4.1.0.48da51f7		

SUBTOTALS - CEC	СС	FORM CEC OVER SHEET PG 3 3 of 55
17 COMMITTEE NAME Jefferson County Republican Party	18 Filer ID 00086977	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 7,061.93
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		<b>\$</b> 82.35
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 11,338.62
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
10. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

Th	e Instru	ction Guide explains how to compl	lete this fo	orm.	1	Total pages Schedule A1: Sch: 1/23 Rpt: 4/55	
2 FILI	ER NAME				3	Filer ID (Ethics Commission	n Filers)
		unty Republican Party				00086977	/
4 Dat	te	5 Full name of contributor 🗌 out-of-stat	te PAC (ID#:	)	7	Amount of Contribution (\$)	
09/	/20/2024	Aaran, Allen (Mr.)					\$7.00
		6 Contributor address; City; State; Zip Code	e		1		
		Vidor, TX 77640					
8 Prir	ncinal occu	pation / Job title (See Instructions)	F	9 Employer (See Instructions	<u> </u> ເ)		
	tired				<i>,</i> ,		
Dat	te	Full name of contributor 🔲 out-of-stat	ite PAC (ID#:	)		Amount of Contribution (\$)	
08/	/12/2024	Adams, Jackson (Mr.)					\$190.00
		Contributor address; City; State; Zip Code			1		
		Beaumont, TX 77713	P				
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Ret	tired						
Dat	te	Full name of contributor 🔲 out-of-stat	ite PAC (ID#:	)		Amount of Contribution (\$)	
08/	/12/2024	Adams, Jackson (Mr.)					\$610.00
		Contributor address; City; State; Zip Code					
Ļ		Beaumont, TX 77713	r		Ĺ		
	ncipal occu tired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Dat	te	Full name of contributor out-of-stat	ite PAC (ID#:	)		Amount of Contribution (\$)	
08/	/27/2024	Adams, Jackson (Mr.)					\$74.00
		Contributor address; City; State; Zip Code					
		Beaumont, TX 77713					
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Ret	tired						
Dat	te	Full name of contributor 🔲 out-of-stat	ate PAC (ID#:	)		Amount of Contribution (\$)	
09/	/05/2024	Adams, Robert (Mr.)					\$54.00
		Contributor address; City; State; Zip Code			1		
		Groves, TX 77619					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
Ret	tired						

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	The Instru	ction Guide explains how to comple	ete this fo	orm.	1	Total pages Schedule A1: Sch: 2/23 Rpt: 5/55	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		unty Republican Party				00086977	,
4	Date	5 Full name of contributor out-of-state	PAC (ID#:	)	7	Amount of Contribution (\$)	
	09/05/2024	Affolter, Susan (Ms.)					\$10.00
		6 Contributor address; City; State; Zip Code					
		Hampshire, TX 77622					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	)		
	Homemaker						
	Date	Full name of contributor 🛛 out-of-state	PAC (ID#:	)		Amount of Contribution (\$)	
	09/20/2024	Barker, Sharon (Ms.)					\$14.00
		Contributor address; City; State; Zip Code					
		Beaumont, TX 77706					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired						
	Date	Full name of contributor 🛛 out-of-state	PAC (ID#:	)		Amount of Contribution (\$)	
	09/19/2024	Barnes, Don (Mr.)					\$30.00
		Contributor address; City; State; Zip Code					
		Beaumont, TX 77706					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	Retired						
	Date	Full name of contributor 🔲 out-of-state	PAC (ID#:	)		Amount of Contribution (\$)	
	09/19/2024	Beavers, Susan (Ms.)					\$40.00
		Contributor address; City; State; Zip Code					
		Nome, TX 77629					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	Retired						
	Date	Full name of contributor 🔲 out-of-state	PAC (ID#:	)		Amount of Contribution (\$)	
	08/12/2024	Brown, Janet (Ms.)					\$1,000.00
		Contributor address; City; State; Zip Code					
		Pt. Neches, TX 77651					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	Case Worke	r					

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 3/23 Rpt: 6/55	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission File	ers)
Jefferson Co	ounty Republican Party		00086977	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
07/31/2024	Carr , DINA (Ms.)		\$	25.00
	6 Contributor address; City; State; Zip Code			
	Beaumont, TX 77705			
8 Principal occu Retired	upation / Job title (See Instructions)	9 Employer (See Instructions	3)	
		<u> </u>	Amount of Contribution (ft)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	25 00
09/05/2024	Carr , DINA (Ms.)		•	25.00
	Contributor address; City; State; Zip Code			
	Beaumont, TX 77705			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
Retired			"	
		<u> </u>	Amount of Contribution (\$	
Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	20.00
09/19/2024	Cook, Jim (Mr.)		-	20.00
	Contributor address; City; State; Zip Code			
	Beaumont, TX 77707			
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	l s)	
Construction			,	
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/20/2024	Cooksey, Paul (Ms.)	)	.,	21.00
	Contributor address; City; State; Zip Code			
	Winnie, TX 77665			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
09/19/2024	Davalos, Darren (Ms.)		\$	30.00
	Contributor address; City; State; Zip Code			
	Beaumont, TX 77706			
	ipation / Job title (See Instructions)	Employer (See Instructions	;) ;)	
Refinery Wo	orker			

The	e Instru	ction Guide explains how to complete	e this form.	1 Total pages Schedule A1: Sch: 4/23 Rpt: 7/55
2 FILE	ER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
		unty Republican Party		00086977
4 Date	е	5 Full name of contributor out-of-state PA	PAC (ID#:)	7 Amount of Contribution (\$)
07/3	31/2024	Dishman, Cindy (Ms.)		\$75.00
		6 Contributor address; City; State; Zip Code		
		Beaumont, TX 77706		
		pation / Job title (See Instructions)	9 Employer (See Instruction	s)
Ηοι	usewife			
Date	е	Full name of contributor out-of-state P	PAC (ID#:)	Amount of Contribution (\$)
09/1	12/2024	Dishman, Cindy (Ms.)		\$75.00
		Contributor address; City; State; Zip Code		
		Beaumont, TX 77706		
		pation / Job title (See Instructions)	Employer (See Instruction	s)
Ηοι	usewife			
Date	e	Full name of contributor out-of-state PA	PAC (ID#:)	Amount of Contribution (\$)
09/1	19/2024	Donald, Wendy (Ms.)		\$7.00
		Contributor address; City; State; Zip Code		
		Village Mills , TX 77663		
	•	pation / Job title (See Instructions)	Employer (See Instruction	s)
Pro	Shop			
Date		Full name of contributor out-of-state P	PAC (ID#:)	Amount of Contribution (\$)
08/1	12/2024	Duhon, Pat (Ms.)		\$20.00
		Contributor address; City; State; Zip Code		
	· .	Beaumont, TX 77706		
Prin Reti		pation / Job title (See Instructions)	Employer (See Instruction	S)
Rei	lieu			1
Date		Full name of contributor out-of-state P.	PAC (ID#:)	Amount of Contribution (\$)
09/0	06/2024	Erickson, Cary (Ms.)		
		Contributor address; City; State; Zip Code		
		Nederland TX 77627		
Duit		Nederland, TX 77627		
Prin Reti		pation / Job title (See Instructions)	Employer (See Instruction	5)
Rel	lieu			
1				

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 5/23 Rpt: 8/55
2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
Jefferson County Republican Party	00086977
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/10/2024 Evans, Joe (Mr.)	\$25.00
6 Contributor address; City; State; Zip Code	1
Beaumont, TX 77707	
<ul> <li>8 Principal occupation / Job title (See Instructions)</li> <li>9 Employer (See Instructions)</li> </ul>	s)
CEO	
Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/12/2024 Evans, Joe (Mr.)	\$25.00
Contributor address; City; State; Zip Code	1
Beaumont, TX 77707	
Principal occupation / Job title (See Instructions) Employer (See Instructions	5)
CEO	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/12/2024 Evans, Joe (Mr.)	\$25.00
Contributor address; City; State; Zip Code	
Beaumont TV 77707	
Beaumont, TX 77707	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	3)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/05/2024 Executive Committe Primary Funds	\$255.00
Contributor address; City; State; Zip Code	
Beaumon, TX 77707	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	c)
	)
Date Full name of contributor out-of-state PAC (ID#: )	Amount of Contribution (\$)
Date     Full name of contributor     out-of-state PAC (ID#:)       09/12/2024     Fagari, Stephanie (Ms.)	\$100.00
Contributor address; City; State; Zip Code	
Beaumont, TX 77706	
	s)
Principal occupation / Job title (See Instructions) Employer (See Instructions Homemaker	s)
Principal occupation / Job title (See Instructions) Employer (See Instructions)	s)

The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 6/23 Rpt: 9/55
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	ounty Republican Party		00086977
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/19/2024	Faraci, Danielle (Ms.)		\$30.
	6 Contributor address; City; State; Zip Code		
	Beaumont, TX 77705		
-	upation / Job title (See Instructions)	9 Employer (See Instructions	)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
07/31/2024	Figari, Stephanie (Ms.)		\$100.
	Contributor address; City; State; Zip Code		
	Beaumont, TX 77706		
	upation / Job title (See Instructions)	Employer (See Instructions	)
Housewife			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/05/2024	Fontenot, Allison (Ms.)		\$63.
	Contributor address; City; State; Zip Code		
Dringinglass	Beaumont, TX 77705	England (Or a la standina)	<u></u>
Operator	upation / Job title (See Instructions)	Employer (See Instructions	)
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
07/23/2024	Friesz, Gordon (Judge)		\$25.
	Contributor address; City; State; Zip Code		
	Nederland, TX 77627		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	)
317 District			)
			Amount of Contribution (\$)
Date 08/23/2024	Full name of contributor out-of-state PAC (ID#: Friesz, Gordon (Judge)	)	Amount of Contribution (\$) \$25.
00/23/2024	Contributor address; City; State; Zip Code		ψ23.
	Contributor address, City, State, Zip Code		
	Nederland, TX 77627		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	)
317 District		· - ·	

1 Total pages Schedule A1: Sch: 7/23 Rpt: 10/55
<b>3</b> Filer ID (Ethics Commission Filers)
00086977
7 Amount of Contribution (\$)
\$25.00
;)
Amount of Contribution (\$)
\$40.00
Amount of Contribution (\$)
\$122.00
) )
,
Amount of Contribution (\$)
\$25.00
s)
Amount of Contribution (\$)
\$26.50
<u> </u>
)

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	The Instru	ction Guide explains how to complete t	his form.	1 Total pages Schedule A1: Sch: 8/23 Rpt: 11/55	
2	FILER NAME			<b>3</b> Filer ID (Ethics Commission File	ers)
		unty Republican Party		00086977	,
4	Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of Contribution (\$)	
	07/31/2024	Greene, Pat		\$	25.00
		6 Contributor address; City; State; Zip Code			
Ļ	Drineirel eeu	Beaumont, TX 77705			
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instruction	15)	
⊨	Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of Contribution (\$)	
	09/12/2024	Greene, Pat		\$	25.00
		Contributor address; City; State; Zip Code			
		Beaumont, TX 77705			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ns)	
	Retired				
	Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of Contribution (\$)	
	09/05/2024	Greene, Pat		\$	10.00
		Contributor address; City; State; Zip Code			
		Decument TV 77705			
⊢	Dringing ago	Beaumont, TX 77705	Employer (Cap Instruction		
	Retired	pation / Job title (See Instructions)	Employer (See Instruction	15)	
				Amount of Contribution (ft)	
	Date 08/12/2024		(ID#:)	Amount of Contribution (\$)	75.00
	00/12/2024			 •	.75.00
		Contributor address; City; State; Zip Code			
		Beaumont, TX 77705			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ls)	
	Retired		none		
	Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of Contribution (\$)	
	07/31/2024	Greene, Patricia (Ms.)		\$	21.03
		Contributor address; City; State; Zip Code			
		Beaumont, TX 77705	i		
		pation / Job title (See Instructions)	Employer (See Instruction	ns)	
	Retired		none		
1					

	The Instru	ction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 9/23 Rpt: 12/55	
2	FILER NAME			3 F	-iler ID (Ethics Commission	Filers)
	Jefferson Cc	ounty Republican Party			00086977	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 /	Amount of Contribution (\$)	
	07/31/2024	Greene, Patricia (Ms.)				\$5.00
	I	6 Contributor address; City; State; Zip Code		1		
		1				
		Beaumont, TX 77705				
8	Principal occu Retired	ipation / Job title (See Instructions)	9 Employer (See Instructions none	5)		
	Date	Full name of contributor out-of-state PAC (ID#:	)	4	Amount of Contribution (\$)	
	08/27/2024	Guidry, Roger (Mr.)				\$40.00
	I	Contributor address; City; State; Zip Code		1		
		1				
		1				
<u> </u>		Lumberton, TX 77654				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired			-		
	Date	Full name of contributor out-of-state PAC (ID#:	)	] 4	Amount of Contribution (\$)	_
	07/18/2024	Hall, Ann (Ms.)				\$25.00
		Contributor address; City; State; Zip Code				
		1				
		Nederland, TX 77627				
<u> </u>	Drincinal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired			5)		
╞═				T ,	Amount of Contribution (¢)	
	Date 08/19/2024	Full name of contributor out-of-state PAC (ID#: Hall, Ann (Ms.)	)	'	Amount of Contribution (\$)	\$25.00
	00/19/2024			-		φ20.00
		Contributor address; City; State; Zip Code				
		1				
		Nederland, TX 77627				
<u> </u>	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Retired					
F	Date	Full name of contributor out-of-state PAC (ID#:	)	4	Amount of Contribution (\$)	
	07/31/2024	Hall, Ann (Ms.)				\$5.00
	I	Contributor address; City; State; Zip Code		1		
		1				
		Nederland, TX 77627				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired					

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 10/23 Rpt: 13/55	
2 FILER NAME			3 Filer ID (Ethics Commission I	Filers)
	ounty Republican Party		00086977	/
4 Date	5 Full name of contributor out-of-state PAC (ID#	t:)	7 Amount of Contribution (\$)	
09/18/2024	Hall, Ann (Ms.)			\$25.00
	6 Contributor address; City; State; Zip Code			
	Nederland, TX 77627			
8 Principal occu	<pre>upation / Job title (See Instructions)</pre>	9 Employer (See Instructions	3)	
Retired				
Date	Full name of contributor out-of-state PAC (ID#	;)	Amount of Contribution (\$)	
09/05/2024	Hammett, Mary Ann (Ms.)			\$14.00
	Contributor address; City; State; Zip Code			
	Nederland, TX 77627			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	3)	
Retired				
Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)	
09/19/2024	Hargraves, Carl (Mr.)			\$50.00
	Contributor address; City; State; Zip Code			
	Winnie, TX 77765	-		
	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Loan Office				
Date		t:)	Amount of Contribution (\$)	
09/12/2024	Harvey, Sharon (Ms.)			\$40.00
	Contributor address; City; State; Zip Code			
	Decument TV 77705			
Dringinglassy	Beaumont, TX 77705	Freeleyer (Coolingtructions	\	
Retired	ipation / Job title (See Instructions)	Employer (See Instructions	5)	
Date	Full name of contributor Out-of-state PAC (ID#	t:)	Amount of Contribution (\$)	<b>†</b> 00.00
09/20/2024	Hecht, Bill (Mr.)			\$30.00
	Contributor address; City; State; Zip Code			
	Nederland, TX 77627			
Principal accu	ipation / Job title (See Instructions)	Employer (See Instructions	) )	
Retired			<i>)</i> /	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 11/23 Rpt: 14/55	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	ounty Republican Party		00086977	1 11010)
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
07/10/2024				\$100.00
	6 Contributor address; City; State; Zip Code			
	Beaumont, TX 77706			
	upation / Job title (See Instructions)	9 Employer (See Instructions)	)	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
08/12/2024	Henderson, Elaine (Ms.)			\$100.00
	Contributor address; City; State; Zip Code			
	Decument TV 77700			
Duity since large	Beaumont, TX 77706		、	
Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions	)	
		<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/12/2024	Henderson, Elaine (Ms.)			\$100.00
	Contributor address; City; State; Zip Code			
	Beaumont, TX 77706			
Drincinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
Retired			)	
		<u> </u>	Amount of Contribution (\$)	
Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	\$20.00
09/19/2024	Henderson, Elaine (Ms.)			<b>ΦΖ</b> Ο.ΟΟ
	Contributor address; City; State; Zip Code			
	Beaumont, TX 77706			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Retired			,	
Date	Full name of contributor Out-of-state PAC (ID#:_		Amount of Contribution (\$)	
09/20/2024	Hinds, Holly (Ms.)	/		\$30.00
00.20.22	Contributor address; City; State; Zip Code			<b>400</b>
	Continuation address, City, State, Zip Code			
	Pt. Neches, TX 77651			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Realtor				

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	The Instru	ction Guide explains how to complete tl	his form.	1	Total pages Schedule A1: Sch: 12/23 Rpt: 15/55	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		ounty Republican Party			00086977	
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7	Amount of Contribution (\$)	
	08/27/2024	Isles, George (Mr.)				\$345.00
		6 Contributor address; City; State; Zip Code		"		
		Lumberton TV 776E7				
8	Drincinal occu	Lumberton, TX 77657 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Retired			5)		
	Date	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
	07/03/2024	JCRP				\$200.00
		Contributor address; City; State; Zip Code		"		
	<u></u>	Beaumont, TX 77707		Ĺ		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
				1		
	Date		C (ID#:)		Amount of Contribution (\$)	ቀርስ ስስ
	09/19/2024					\$59.00
		Contributor address; City; State; Zip Code				
		Nederland, TX 77627				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired					
	Date	Full name of contributor out-of-state PAC	C (ID#:)	Τ	Amount of Contribution (\$)	
	09/19/2024	Kim, Linda (Ms.)				\$30.00
		Contributor address; City; State; Zip Code		1		
		Lumberton, TX 77657				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Retired			3)		
╞	Date	Full name of contributor out-of-state PAC	)	Τ	Amount of Contribution (\$)	
	08/27/2024	Kozinski, Brian (Mr.)	· (ID#)		, and an or contraction (	\$30.00
		Contributor address; City; State; Zip Code		·		
		Deweyville, TX 77614				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired					
						ſ

The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 13/23 Rpt: 16/55
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	ounty Republican Party		00086977
4 Date	5 Full name of contributor out-of-state PAC (ID	D#:)	7 Amount of Contribution (\$)
09/05/2024	LaRocca, Becky (Ms.)		\$10.0
	6 Contributor address; City; State; Zip Code		
	Beaumont, TX 77708		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	3)
Retired			
Date	Full name of contributor Out-of-state PAC (ID	)#:)	Amount of Contribution (\$)
08/27/2024	Langham, Tonya (Mr.)		\$40.0
	Beaumont, TX 77705		
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	I
Assistant Ma			,
Date	Full name of contributor	)	Amount of Contribution (\$)
08/05/2024	Lawson, Brian (Mr.)	)#)	\$240.0
00/03/2024			ψ240.0
	Contributor address; City; State; Zip Code		
	Beaumont, TX 77706		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Retired			<i>"</i>
Date		D#:)	Amount of Contribution (\$)
09/19/2024			\$30.0
	Contributor address; City; State; Zip Code		
	Nederland TV 77627		
Deinsinglasse	Nederland, TX 77627	England (Or a last mating	
-	pation / Job title (See Instructions)	Employer (See Instructions	6)
Retired			
Date	Full name of contributor 🛛 out-of-state PAC (IE	D#:)	Amount of Contribution (\$)
09/19/2024	Lindstrom, Kevin (Mr.)		\$40.0
	Contributor address; City; State; Zip Code		
	Beaumont, TX 77705		
	pation / Job title (See Instructions)	Employer (See Instructions	S)
Retired			

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 14/23 Rpt: 17/55
2	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
		ounty Republican Party		00086977
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
(	09/20/2024	MacKenzie, Elizabeth (Ms.)		\$8.00
		6 Contributor address; City; State; Zip Code		
		Beaumont, TX 77707		
	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
	07/24/2024	Madry, Bruce (Mr.)	)	\$50.00
	0112412024			\$30.00
		Contributor address; City; State; Zip Code		
		Groves, TX 77619		
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	) ;)
	Industrial Wo	orker		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
(	08/23/2024	Madry, Bruce (Mr.)		\$50.00
		Contributor address; City; State; Zip Code		
		Groves, TX 77619		
	•	pation / Job title (See Instructions)	Employer (See Instructions	
	Industrial Wo	Drker		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	09/06/2024	Madry, Bruce (Mr.)		\$40.00
		Contributor address; City; State; Zip Code		
		Groves, TX 77619		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	] ;)
	Industrial Wo			, ,
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
(	09/24/2024	Madry, Bruce (Mr.)		\$50.00
		Contributor address; City; State; Zip Code		
		Groves, TX 77619		
		pation / Job title (See Instructions)	Employer (See Instructions	<i>;</i> )
	Industrial Wo	orker		

	The Instru	ction Guide explains how to com	plete this fo	rm.	1	Total pages Schedule A1: Sch: 15/23 Rpt: 18/55	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		unty Republican Party			-	00086977	,
4	Date	5 Full name of contributor out-of-	state PAC (ID#:	)	7	Amount of Contribution (\$)	
(	08/12/2024	Mayes, Pat (Ms.)					\$30.00
		6 Contributor address; City; State; Zip Co					
		Document TV 77706					
0	Principal occu	Beaumont, TX 77706 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Retired		3		<i></i>		
I	Date	Full name of contributor out-of-	state PAC (ID#:	)		Amount of Contribution (\$)	
(	07/10/2024	Miller, Danny (Mr.)					\$25.00
		Contributor address; City; State; Zip Co					
		Pt. Neches, TX 77651			Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						
	Date		state PAC (ID#:	)		Amount of Contribution (\$)	
	09/19/2024						\$40.00
		Contributor address; City; State; Zip Co	ode				
		Beaumont, TX 77706					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Homemaker				,		
	Date	Full name of contributor	state PAC (ID#:	)		Amount of Contribution (\$)	
	09/12/2024	Moffitt, Sammie (Mr.)		/		/ uncount of Containstation (+)	\$20.00
		Beaumont, TX 77707					
I	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						
	Date	Full name of contributor out-of-	state PAC (ID#:	)		Amount of Contribution (\$)	
(	09/20/2024	Moran, Debbie (Ms.)					\$74.00
		Contributor address; City; State; Zip Co	ode				
		Groves, TX 77619			Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 16/23 Rpt: 19/55
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	ounty Republican Party		00086977
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
09/20/2024	Morris, Cynthia (Ms.)		\$28.0
	6 Contributor address; City; State; Zip Code		
	Lumberton, TX 77657		
	pation / Job title (See Instructions)	9 Employer (See Instructions	)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
07/17/2024	Munro, Mary (Ms.)		\$50.0
	Contributor address; City; State; Zip Code		
	Decument TV 77707		
Drinoinal agou	Beaumont , TX 77707	Employer (See Instructions	
Retired	pation / Job title (See Instructions)	Employer (See Instructions	)
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/19/2024	Munro, Mary (Ms.)		\$50.0
	Contributor address; City; State; Zip Code		
	Beaumont , TX 77707		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	) )
Retired			)
Date	Full name of contributor Out-of-state PAC (ID#:	\	Amount of Contribution (\$)
09/14/2024	Full name of contributor out-of-state PAC (ID#: Munro, Mary (Ms.)	)	\$50.
03/14/2024			ψ00.
	Contributor address; City; State; Zip Code		
	Beaumont , TX 77707		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
09/17/2024	Munro, Mary (Ms.)		\$50.0
	Contributor address; City; State; Zip Code		
	Beaumont , TX 77707		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)
Retired			
		•	

The	e Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 17/23 Rpt: 20/55
2 FILE	ER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
		ounty Republican Party		00086977
4 Date	е	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
07/3	10/2024	Nicholas, Linda (Ms.)		\$30.00
		6 Contributor address; City; State; Zip Code		1
		Pt. NECHES, TX 77651		
8 Prin	icipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> 5)
	ired	· · · · · · · · · · · · · · · · · · ·		, 
Date	e	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/2	19/2024	Nicholas, Linda (Ms.)		\$30.00
		Contributor address; City; State; Zip Code		
Drin		Pt. NECHES, TX 77651		
	icipal occu iired	pation / Job title (See Instructions)	Employer (See Instructions	5)
Date		Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
Uor.	12/2024			\$50.00
		Contributor address; City; State; Zip Code		
		Beaumont, TX 77706		
Prin	icipal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Ret	ired			
Date	e	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
07/2	10/2024	Pacetti, Rodney (Mr.)		\$25.00
		Contributor address; City; State; Zip Code		1
		Groves, TX 77619		
Prin	icipal occu	pation / Job title (See Instructions)	Employer (See Instructions	۱ ۶)
	ired			,
Date	е	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/	12/2024	Pacetti, Rodney (Mr.)		\$25.00
		Contributor address; City; State; Zip Code		
	· .	Groves, TX 77619		
		pation / Job title (See Instructions)	Employer (See Instructions	5)
Rei	ired			
1				

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 18/23 Rpt: 21/55	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	5)
	ounty Republican Party		00086977	-)
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
09/12/2024	Pacetti, Rodney (Mr.)		\$25	5.00
	6 Contributor address; City; State; Zip Code			
	Groves, TX 77619			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	)	
Retired			/	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
07/24/2024	Patton, James (Mr.)		\$25	5.00
	Contributor address; City; State; Zip Code			
	Beaumont, TX 77703	-		
-	upation / Job title (See Instructions)	Employer (See Instructions	)	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
08/23/2024	Patton, James (Mr.)		\$25	5.00
	Contributor address; City; State; Zip Code			
	Decument TV 77702			
Dringinglagg	Beaumont, TX 77703	Employer (Cool Instructions		
Retired	upation / Job title (See Instructions)	Employer (See Instructions	)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/24/2024	Patton, James (Mr.)	)		5.00
00/2 1/202 1	Contributor address; City; State; Zip Code			0.00
	Contributor address, City, State, Zip Code			
	Beaumont, TX 77703			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	)	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
08/12/2024	Poindexter, Debra (Ms.)		\$75	5.00
	Contributor address; City; State; Zip Code			
	Nederland, TX 77627			
-	upation / Job title (See Instructions)	Employer (See Instructions	)	
Retired				

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 19/23 Rpt: 22/55
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Jefferson Co	ounty Republican Party		00086977
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/12/2024	Poindexter, Debra (Ms.)		\$100.00
	6 Contributor address; City; State; Zip Code		
	Nodesland TV 77607		
• Drincinal occu	Ipation / Job title (See Instructions)	9 Employer (See Instructions	
Retired			)
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/12/2024	Poindexter, Debra (Ms.)		\$20.00
	Contributor address; City; State; Zip Code		
Duin single age	Nederland, TX 77627		
Principal occu Retired	ipation / Job title (See Instructions)	Employer (See Instructions	)
	<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
09/20/2024	Poindexter, Debra (Ms.)		\$80.00
	Contributor address; City; State; Zip Code		
	Nederland, TX 77627		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/05/2024	Ramirez, Nancy (Ms.)		\$21.00
	Contributor address; City; State; Zip Code		
Distantana	Groves, TX 77619		
Principal occu Retired	ipation / Job title (See Instructions)	Employer (See Instructions	)
	<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
08/05/2024	Reeves, Chris (Mr.)		\$50.00
	Contributor address; City; State; Zip Code		
	Pt. Neches, TX 77651		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	() ;)
Oil Worker			,

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 20/23 Rpt: 23/55	
2 FILER NAME			3 Filer ID (Ethics Commission Fi	ilers)
	ounty Republican Party		00086977	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
09/20/2024				\$83.00
	6 Contributor address; City; State; Zip Code			
C. D. Starting Lagon	Beaumont, TX 77713		<u> </u>	
8 Principal occu Retired	upation / Job title (See Instructions)	9 Employer (See Instructions	\$)	
	<u> </u>		1 · · · · · · · · · · · · · · · · · · ·	
Date	—	)	Amount of Contribution (\$)	<b>*</b> 5 50
07/10/2024				\$5.58
	Contributor address; City; State; Zip Code			
	Nederland, TX 77627			
Principal occl	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
	,		,	
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u> )	Amount of Contribution (\$)	
08/02/2024	SETXRW			\$88.82
	Contributor address; City; State; Zip Code			
	Nederland, TX 77627			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/19/2024	Shearer, Phyllis (Ms.)			\$28.00
	Contributor address; City; State; Zip Code			
	Pt. Neches, TX 77651			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
Retired			')	
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)	
07/18/2024	Simoneaux, Clifton (Mr.)	J		\$25.00
01/10/101	Contributor address; City; State; Zip Code			Ψ <b>L</b> 0.00
	Contributor address, ony, state, zip code			
	Nederland, TX 77627			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Imaging Dire	ector			

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	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 21/23 Rpt: 24/55
2	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
		unty Republican Party		00086977
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
	08/15/2024	Simoneaux, Clifton (Mr.)		\$25.00
		6 Contributor address; City; State; Zip Code		
		Nederland, TX 77627		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<b>I</b> 5)
	Imaging Dire			,
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	09/12/2024	Simoneaux, Clifton (Mr.)		\$10.00
		Contributor address; City; State; Zip Code		
		Nederland, TX 77627		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	Imaging Dire	ctor		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	09/12/2024	Simoneaux, Clifton (Mr.)		\$25.00
		Contributor address; City; State; Zip Code		
		Nederland, TX 77627	1	
		pation / Job title (See Instructions)	Employer (See Instructions	5)
	Imaging Dire	ctor		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	09/20/2024	Simpson, Cindy (Ms.)		\$20.00
		Contributor address; City; State; Zip Code		
		Beaumont, TX 77713		
		pation / Job title (See Instructions)	Employer (See Instructions	5)
	Patient Sche			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	09/06/2024	Smith, Saundra		\$20.00
		Contributor address; City; State; Zip Code		
		Noderland TV 77627		
⊢	Drineir - L	Nederland, TX 77627		
Í	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)
L	Reuleu			

The Instru	ction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 22/23 Rpt: 25/55		
2 FILER NAME		3 Filer ID (Ethics Commission F	ilers)	
	ounty Republican Party		00086977	/
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
09/20/2024	Velaso, Heather (Ms.)		\$44.00	
	6 Contributor address; City; State; Zip Code			
	Nederland, TX 77627			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	3)	
phybottomis	t			
Date	Full name of contributor out-of-state PAC (ID#:	· )	Amount of Contribution (\$)	
08/27/2024	Watson, Mary (Ms.)			\$40.00
	Contributor address; City; State; Zip Code			
	Beaumont, TX 77707			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	; ;)	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/20/2024	Watts, Jan (Ms.)			\$20.00
	Contributor address; City; State; Zip Code			
	Bridge City, TX 77611			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/20/2024	Westbrook, Ricky (Mr.)			\$14.00
	Contributor address; City; State; Zip Code			
	Beaumont, TX 77705			
	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Project Man	ager			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/05/2024	Williams, Thomas (Mr.)		\$40.00	
	Contributor address; City; State; Zip Code			
	Beaumont, TX 77705			
	upation / Job title (See Instructions)	3)		
Fireman				

	The Instruc	ction Guide explains how to complete	1	Total pages Schedule A1: Sch: 23/23 Rpt: 26/55		
2	FILER NAME		3	Filer ID (Ethics Commission	i Filers)	
		unty Republican Party		00086977	,	
4	Date	5 Full name of contributor out-of-state P.	AC (ID#:)	7	Amount of Contribution (\$)	
	08/27/2024	Wilson, Curtis (Mr.)			\$100.00	
		6 Contributor address; City; State; Zip Code				
		Beaumont, TX 77706				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	าร)		
	Self Employe	ed				
	Date	Full name of contributor out-of-state P.	AC (ID#:)		Amount of Contribution (\$)	
	07/15/2024	Wright, Jay (Mr.)				\$25.00
		Contributor address; City; State; Zip Code				
		Conroe, TX 77301				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	וs)		
	Justice of Ap	peals				
_	Date	Full name of contributor	AC (ID#:)	Т	Amount of Contribution (\$)	
	08/13/2024	Wright, Jay (Mr.)	//C (ID#)			\$25.00
	00/10/2021					\$20.00
		Contributor address; City; State; Zip Code				
		Conroe, TX 77301				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	15)		
	Justice of Ap			,		
_	Date	·		<b>—</b>	Amount of Contribution (\$)	
	09/13/2024	Wright, Jay (Mr.)	AC (ID#:)		Amount of Continuation (\$)	\$25.00
	09/13/2024					φ25.00
		Contributor address; City; State; Zip Code				
		Conroe, TX 77301				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	<u> </u>		
	Justice of Ap		Employer (See instruction	13)		
╞		·				
	Date	Full name of contributor out-of-state P	AC (ID#:)		Amount of Contribution (\$)	<b>#00.00</b>
	09/20/2024	Wright, Winfred (Mr.)			\$30.00	
		Contributor address; City; State; Zip Code				
		Pt. Neches, TX 77651	Employer (See Instruction			
		pation / Job title (See Instructions)	าร)			
	Retired					

## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/3 Rpt: 27/55						
	eunty Republican Party		3 Filer ID (Ethics Commission Filers) 00086977					
<sup>4</sup> TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$						
5 Date 07/15/2024	<ul> <li>Full name of contributor out-of-state PAC (ID#:Carr , DINA (Ms.)</li> <li>Contributor address; City; State; Zip Code</li> <li>Beaumont, TX 77705</li> </ul>	<ul> <li>8 Amount of contribution (\$)</li> <li>9 In-kind contribution description</li> <li>\$23.79</li> <li>1</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> </ul>						
<b>10</b> Principal occu Retired	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON						
	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)					
14 Contributor's	employer/law firm (FOR JUDICIAL)	<b>15</b> Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)					
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	I						
Date 08/09/2024	Full name of contributor out-of-state PAC (ID#: Carr , DINA (Ms.) Contributor address; City; State; Zip Code	)	Amount of In-kind contribution contribution (\$) description \$6.50 I Sympathy Cards					
	Beaumont, TX 77705		Check if travel outside of Texas. Complete Schedule T.					
Principal occu Retired	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date 08/16/2024	Full name of contributor out-of-state PAC (ID#: Greene, Pat Contributor address; City; State; Zip Code	)	Amount of In-kind contribution contribution (\$) description \$2.71 I Sympathy Cards					
	Beaumont, TX 77705		I Check if travel outside of Texas. Complete Schedule T.					
Principal occu Retired	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON						
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)					
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)								

## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 2/3 Rpt: 28/55							
	e ounty Republican Party	3 Filer ID (Ethics Commission Filers) 00086977							
<sup>4</sup> TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$							
5 Date 09/02/2024	<ul> <li>Full name of contributor out-of-state PAC (ID#:</li> <li>Greene, Pat</li> <li>7 Contributor address; City; State; Zip Code</li> <li>Beaumont, TX 77705</li> </ul>	8 Amount of 9 In-kind contribution contribution (\$) description \$15.11   Kitchen Supplies							
<b>10</b> Principal occu Retired	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON							
	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)						
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)						
16 If contributor	16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)								
Date 09/02/2024	Full name of contributor out-of-state PAC (ID#: Greene, Pat Contributor address; City; State; Zip Code	)	Amount of In-kind contribution contribution (\$) description \$15.33   Knobs for kitchen cabinets						
	Beaumont, TX 77705		Check if travel outside of Texas. Complete Schedule T.						
Principal occu Retired	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)						
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)						
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)						
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)								
Date 09/19/2024			Amount of In-kind contribution contribution (\$) description \$4.31 keys for Pt. Neches office						
	Beaumont, TX 77705		Check if travel outside of Texas. Complete Schedule T.						
Retired	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON							
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	ob title (FOR JUDICIAL) (See instructions)						
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)						
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)									

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

	The Instru	ction Guide explains how to complete this f	1	1 Total pages Schedule A2: Sch: 3/3 Rpt: 29/55				
2	FILER NAME		3	3 Filer ID (Ethics Commission Filers)				
	Jefferson Co	ounty Republican Party			00086977			
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$					
5	Date 08/08/2024	<ul> <li>6 Full name of contributor out-of-state PAC (ID#: Greene, Patricia (Ms.)</li> <li>7 Contributor address; City; State; Zip Code</li> <li>Beaumont, TX 77705</li> </ul>	)	8	Amount of contribution (\$) 9 In-kind contribution description \$14.60 book of postage stamps			
10	Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JU				
	Retired		none					
12	Contributor's	principal occupation (FOR JUDICIAL)	<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)					
14	Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's	spouse (if any) (FOR JUDICIAL)			
16	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Expense Beverage Expense wards/Memorials Exp Services Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W			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:	2			•		•	3	Filer ID	(Ethics Commission Filers)	
-	Sch: 1/26 Rpt: 30/55		Jefferson Count	y Republican	Party			ľ	00086977	(	
4	Date	5	Payee name								
	07/10/2024		2022 Block Inc								
6	Amount (\$)7Payee address;City;State;Zip Code\$5.711455 Market St. Ste. 600										
			san Francisco, (	CA 94103							
8	PURPOSE OF		Category (See Cate	egories listed at the t	op of this sche	edule)	(b) Description				
	EXPENDITURE		Event Expense						ide of Texas. Com , officeholder living		
							Credit Card S		-	expense	
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeho	lder name	C	Dffice sou	Jht		Office he	ld	
	Date		Payee name								
	07/15/2024		2022 Block Inc								
	Amount (\$)		Payee address;	City;	State;	Zip Co	de				
	\$1.03		1455 Market St.	Ste. 600							
			san Francisco, (	CA 94103							
	PURPOSE OF EXPENDITURE		Category (See Cate Event Expense	egories listed at the t	op of this sche	edule)		, TX,	ide of Texas. Com , officeholder living vice Charge		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeho	lder name	C	) Office sou	jht		Office he	ld	
-	Date		Payee name								
	07/17/2024		2022 Block Inc								
-	Amount (\$)		Payee address;	City;	State <sup>.</sup>	Zip Co	10				
	\$1.90		1455 Market St.	-	otato,	210 000					
			san Francisco, (	CA 94103							
	PURPOSE OF EXPENDITURE		Category (See Cate Event Expense	egories listed at the t	op of this sche	edule)			ide of Texas. Com		
							Credit Card S		, officeholder living vice	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeho	lder name	C	Dffice sou	yht		Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E e Legal Services The Instruction Gui	Expense	Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2 FIL				<u> </u>	3	Filer ID	(Ethics Commission Filers)
-	Sch: 2/26 Rpt: 31/55		erson County Republica	n Party				00086977	()
4	Date 07/18/2024		ee name 2 Block Inc						
6	Amount (\$) \$2.06	145	ee address; City; 5 Market St. Ste. 600 Francisco, CA 94103	State;	Zip Coo	e			
8	PURPOSE OF EXPENDITURE		egory (See Categories listed at the ent Expense	e top of this sche	edule)		n, TX,	officeholder living	plete Schedule T. I expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		idate/Officeholder name	C	Office soug	ht		Office he	eld
	Date	Pay	ee name						
	07/23/2024	202	2 Block Inc						
	Amount (\$) \$1.03		ee address; City; 5 Market St. Ste. 600	State;	Zip Coo	е			
	PURPOSE	sar (a) Cat	Francisco, CA 94103			<b>b)</b> Description			
	OF	Fee	<b>•</b> • • • • • • • • • • • • • • • • • •	e top of this sche	edule)	Check if travel	n, TX,	officeholder living	plete Schedule T. expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		idate/Officeholder name	C	Office soug	ht		Office he	eld
	Date	Pay	ee name						
	07/24/2024	202	2 Block Inc						
	Amount (\$) \$2.93		ee address; City; 5 Market St. Ste. 600	State;	Zip Coo	e			
		sar	Francisco, CA 94103						
	PURPOSE OF EXPENDITURE	<b>(a)</b> Cat Fee		e top of this sche	edule)		n, TX,	officeholder living	plete Schedule T. I expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		idate/Officeholder name	C	Office soug	ht		Office he	eld
					_		_		

	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 The Instruction Guide exp	Of Po Pr Sa	ffice Overh olling Expe rinting Expe alaries/Wa	ense ges/Contract Labor		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:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 3/26 Rpt: 32/55		Jefferson County Republican Part	у				00086977		
4	Date	5	Payee name							
	07/30/2024		2022 Block Inc							
6	Amount (\$)	7	Payee address; City; S	State; Z	Zip Code	e				
	\$0.79		1455 Market St. Ste. 600							
			san Francisco, CA 94103							
8	PURPOSE	(a)	Category (See Categories listed at the top of t	his schodul	(I	) Description				
-	OF	,	Event Expense		ie) (		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE		p			Check if Austin	, TX,	, officeholder living expense		
						Credit Card S	Serv	vice charge		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offic	ce sougł	nt		Office held		
	Date		Payee name							
	08/05/2024		2022 Block Inc							
	Amount (\$)		Payee address; City; S	State; Z	Zip Code	Э				
	\$7.74		1455 Market St. Ste. 600							
			san Francisco, CA 94103							
	PURPOSE	(a)	Category (See Categories listed at the top of t	his schedul	le) (I	) Description				
	OF EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.		
								, officeholder living expense		
						Credit Card s	serv	vice charges		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offic	ce sough	nt		Office held		
	Date		Payee name							
	08/12/2024		2022 Block Inc							
	Amount (\$)		Payee address; City; S	State; Z	Zip Code	9				
	\$6.34		1455 Market St. Ste. 600							
			san Francisco, CA 94103							
	PURPOSE	(a)	Category (See Categories listed at the top of t	his schedul	le) (I	) Description				
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.		
	LAFENDITORE							, officeholder living expense		
						Credit Card S	Serv	vices tee		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offic	ce sough	nt		Office held		
	experiatione to benefit C/Of	•								

		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       Gitt/Awards/Memorials Expense     Printing Expense       ommittee     Legal Services     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)
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
	Sch: 4/26 Rpt: 33/55	Jefferson County Republican Party	00086977
4	Date	Payee name	
	08/13/2024	2022 Block Inc	
6	Amount (\$)	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		Itside of Texas. Complete Schedule T.
		Credit Card Se	rx, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	08/15/2024	2022 Block Inc	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1.03	1455 Market St. Ste. 600	
		san Francisco, CA 94103	
	PURPOSE		
	OF EXPENDITURE	Fees	utside of Texas. Complete Schedule T. IX, officeholder living expense
			sivice charge
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	08/19/2024	2022 Block Inc	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1.03	1455 Market St. Ste. 600	
		san Francisco, CA 94103	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. IX, officeholder living expense Prvice Fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense				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:	2			•	3	Filer ID (Ethics Commission Filers)			
-	Sch: 5/26 Rpt: 34/55									
4	4 Date 5 Payee name									
	08/23/2024		2022 Block Inc							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le					
	\$2.93		1455 Market St. Ste. 600							
		san Francisco, CA 94103								
8	PURPOSE				(b) Decoription					
ľ	OF	(a)	Category (See Categories listed at the top of this sche Donation	edule)	(b) Description	outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Donation				, officeholder living expense			
					Credit Card s	er.	vice charges			
9	I     I       Complete ONLY if direct     Candidate/Officeholder name     Office sought     Office held       expenditure to benefit C/OH     Office held     Office held						Office held			
	Date									
			•	ayee name						
	08/23/2024 2022 Block Inc									
	Amount (\$)Payee address;City;State;ZipCode									
	\$2.93 1455 Market St. Ste. 600									
			san Francisco, CA 94103							
	PURPOSE OF       (a) Category       (See Categories listed at the top of this schedule)       (b) Description         Description       Description       Description						ide of Texas, Complete Schedule T.			
EXPENDITURE			Event Expense       Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense							
					Credit Card S	Serv	vice Charge			
Complete <u>ONLY</u> if direct expenditure to benefit C/O			Candidate/Officeholder name Office sought Office held							
Date Payee name										
08/29/2024 2022 Block Inc										
Amount (\$) Payee address; City; State; Zip Code										
	\$4.38 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		Event Expense				ide of Texas. Complete Schedule T.			
	Credit Card Service Charge									
	0									
Complete <u>ONLY</u> if direct expenditure to benefit C/OF			5				Office held			
	-									

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/Reimbursen Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			ead/Rental Expense nse ense ges/Contract Labor	t 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:	FILER NAME				3 Filer ID	(Ethics Commission Filers)		
	Sch: 6/26 Rpt: 35/55		ty Republican Party			00086977	,		
4	Date	Payee name							
	09/12/2024	2022 Block Inc							
6	Amount (\$) \$3.65	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>1455 Market St. Ste. 600</li> <li>san Francisco, CA 94103</li> </ul>							
•	DUDDOCE								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Sched Check if Austin, TX, officeholder living expense Credit Card Service Charge				ng expense					
9	Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								
	Date	Payee name							
	09/12/2024	2022 Block Inc							
Amount (\$) Payee address; City; State; Zip Code									
	\$1.03	1455 Market St. san Francisco, (							
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Fees</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Credit Card Service Charge</li> </ul> </li> </ul>					ng expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H							
Date Payee name									
	09/12/2024	2022 Block Inc							
	Amount (\$) \$0.98	Payee address; 1455 Market St.	-	e; Zip Cod	e				
	san Francisco, CA 94103								
	PURPOSE OF EXPENDITURE	Category <sub>(See Cat</sub> Fees	egories listed at the top of this so	chedule) (	Check if Austin	outside of Texas. Co n, TX, officeholder liv Service Charg	ng expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office soug H			nt Office held				

EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	hittee Legal Services	Event Expense         Loan Repayment/Reimbursement           Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           Gitt/Awards/Memorials Expense         Printing Expense				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:	<b>2</b> F		-		-	3	Filer ID	(Ethics Commission Filers)		
	Sch: 7/26 Rpt: 36/55		efferson County Republican	Party				00086977	(		
4	Date 09/12/2024		ayee name 022 Block Inc								
6	Amount (\$) \$1.03	7 Payee address;       City;       State; Zip Code         3       1455 Market St. Ste. 600         san Francisco, CA 94103									
8	PURPOSE OF EXPENDITURE		<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Fees</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Credit Card Service Charge</li> </ul> </li> </ul>								
9	Complete ONLY if direct         Candidate/Officeholder name         Office sought         Office held           expenditure to benefit C/OH         Office held         Office held         Office held							1			
	Date	F	ayee name								
	09/13/2024 2022 Block Inc										
	Amount (\$) \$1.03		ayee address; City; 455 Market St. Ste. 600	State;	Zip Coo	le					
	PURPOSE		an Francisco, CA 94103 Category (See Categories listed at the	ton of this sch	edule)	(b) Description					
	OF EXPENDITURE	Fee Check if travel outside of Texa Check if Austin, TX, officehold Credit Card Service Ch					, officeholder living e				
Complete <u>ONLY</u> if direct expenditure to benefit C/O			Candidate/Officeholder name Office sought H					Office held			
	Date Payee name										
09/14/2024 20			022 Block Inc								
	Amount (\$)Payee address;City;State;Zip Code\$1.901455 Market St. Ste. 600										
	san Francisco, CA 94103										
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees			edule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Service Charge					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office soug	ht		Office held	1 		
		_			_		_				

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials E Legal Services The Instruction Guid		Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	<b>2</b> F	ILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 8/26 Rpt: 37/55		efferson County Republican	Party				00086977	``````````````````````````````````````
4	Date 09/18/2024		Payee name 2022 Block Inc						
6	Amount (\$) \$1.03	1	Payee address; City; .455 Market St. Ste. 600 an Francisco, CA 94103	State;	Zip Coo	e			
8	PURPOSE OF EXPENDITURE	Category (See Categories listed at the	edule)		I, TX,	officeholder living	plete Schedule T. expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office he	eld
	Date	F	Payee name						
	09/23/2024	2	2022 Block Inc						
	Amount (\$) \$1.03		Payee address; City; .455 Market St. Ste. 600	State;	Zip Coo	e			
	PURPOSE		category (See Categories listed at the			b) Description			
	OF		Ategory (See Categories listed at the	top of this sche	edule)	Check if travel	ı, TX,	officeholder living	plete Schedule T. expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office he	eld
	Date	F	Payee name						
	09/24/2024	2	2022 Block Inc						
	Amount (\$) \$2.93		Payee address; City; .455 Market St. Ste. 600	State;	Zip Coo	e			
		s	an Francisco, CA 94103						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the	top of this sche	edule)		ı, ТХ,	officeholder living	plete Schedule T. expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/M	xpense Vages/Contract Labor		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:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 9/26 Rpt: 38/55		Jefferson County Republican Party				00086977		
4	Date	5	Payee name						
	08/21/2024		Beaumont Pet Alive						
6	Amount (\$)	7	Payee address; City; State	; Zip Co	de				
	\$50.00		46718   10						
			winnie , TX 77665						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this scl	hedule)	(b) Description				
	EXPENDITURE		Donation				de of Texas. Complete Schedule T. officeholder living expense		
							ark Steinhagen		
					in memory of				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght		Office held		
	Date		Payee name						
	07/24/2024		Beaumont chamber of Commerce						
	Amount (\$)		Payee address; City; State	; Zip Co	de				
\$250.00 1110 Park St.									
			Beaumont, TX 77701						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Annual fee	hedule)			de of Texas. Complete Schedule T. officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L H	Office held						
	Date		Payee name						
	08/21/2024		Beaumont chamber of Commerce						
	Amount (\$)		Payee address; City; State	; Zip Co	de				
	\$600.00		1110 Park St.						
			Beaumont, TX 77701	i					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Event Expense	hedule)		, TX,	de of Texas. Complete Schedule T. , officeholder living expense ting		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	nittee Gift/Awards	age Expense /Memorials Expense	Office Overhea Polling Expens Printing Exper Salaries/Wage	ise s/Contract Labor	Transporta Travel in D Travel Out				
1	Total pages Schedule F1:	ILER NAME				3 Filer ID	(Ethics Commission Filers)			
	Sch: 10/26 Rpt: 39/55	efferson County R	epublican Party			000869	77			
4	Date	ayee name								
	09/16/2024	Bordelon, Michael								
6	Amount (\$)	-	ity; State;	Zip Code						
	\$20.76	924. Avel L								
		lederland, TX 7762	27							
8	PURPOSE	Category (See Categorie	es listed at the top of this sch	edule) (b)	Description					
	OF EXPENDITURE	Paint					Complete Schedule T.			
					Repair wall P	n, TX, officeholder				
						t. Neene O				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	ndidate/Officeholder	name C	Dffice sought		Offic	e held			
	Date	Payee name								
	07/15/2024	CARR, DINA (Ms.)								
Amount (\$) Payee address; City; State; Zip Code										
	\$23.79	225 Stillwater Dr.	ity, Otato,	210 0000						
	φ20.15									
		Beaumont, TX 7770	)5							
	PURPOSE OF EXPENDITURE	Category (See Categoria Event Expense	es listed at the top of this sch	edule) (b)		outside of Texas. I, TX, officeholder	Complete Schedule T. living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	ndidate/Officeholder	name C	Office sought		Offic	e held			
	Date	ayee name								
	08/20/2024	CARR, DINA (Ms.)								
	Amount (\$)	ayee address; C	ity; State;	Zip Code						
	\$240.14	225 Stillwater Dr.	-							
	Beaumont, TX 77705									
	PURPOSE OF		es listed at the top of this sch	edule) (b)	Description	outoido of T	Complete Schodule T			
	EXPENDITURE	Office Overhead/Re	ntal Expense			ı, TX, officeholder	Complete Schedule T. living expense			
-	Complete ONLY if direct	ndidate/Officeholder	name C	Office sought		Offic	e held			
	expenditure to benefit C/OI					2.110				
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl	C P S	Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/Contract Labor		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:	2				•	3	Filer ID (Ethics Commission Filers)		
-	Sch: 11/26 Rpt: 40/55		Jefferson County Republican Party	y				00086977		
4	Date	5	Payee name							
	08/20/2024		CARR, DINA (Ms.)							
6	Amount (\$)	7	Payee address; City; S	State; Z	Zip Coc	e				
	\$202.81		2225 Stillwater Dr.							
			Beaumont, TX 77705							
8	PURPOSE	(a)	Category (See Categories listed at the top of th	hic cohodu		b) Description				
-	OF		Office Overhead/Rental Expense	lis scheuu	uie)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE					Check if Austin	, TX,	, officeholder living expense		
						Google invoi	се			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Offi	ice soug	ht		Office held		
	Date		Payee name							
	08/09/2024		CARR, DINA (Ms.)							
	Amount (\$)		Payee address; City; S	State; 2	Zip Coc	e				
	\$6.50		2225 Stillwater Dr.		•					
			Beaumont, TX 77705							
	PURPOSE OF	(a)	Category (See Categories listed at the top of th	his schedu	ule)	b) Description		ide of Taura Consulta Cabadula T		
	EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T. , officeholder living expense		
						Gell Well Ca				
	Complete ONLY if direct		andidate/Officeholder name	Offi	ice soug	ht		Office held		
	expenditure to benefit C/OI	Н								
	Date		Payee name							
	09/17/2024		CARR, DINA (Ms.)							
	Amount (\$)			State: 2	Zip Coc	e				
	\$61.81		2225 Stillwater Dr.	June, 2	210 000	C				
	401.01									
	Beaumont, TX 77705									
PURPOSE     (a) Category     (See Categories listed at the top of this schedule)     (b) Description										
	OF EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.		
							, TX,	, officeholder living expense		
						Candy				
	Osmalata Obli Milli "					1- 4				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Offi	ice soug	nt		Office held		
	,									

	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/Reimb Fees Office Overhead/Rental Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contrac tegal Services Salaries/Wages/Contrac	Expense Transportation Equipment & Related Expense Travel in District Travel Out of District t Labor OTHER (enter a category not listed above)							
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)							
-	Sch: 12/26 Rpt: 41/55	Jefferson County Republican Party	00086977							
4	Date 09/17/2024	Payee name CARR, DINA (Ms.)								
6 Amount (\$)       7 Payee address; City; State; Zip Code         \$60.53       2225 Stillwater Dr.         Beaumont, TX 77705										
8	PURPOSE OF EXPENDITURE		ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense ace light bulbs/Pt. Neches							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	07/12/2024	City of Pt. Neches								
	Amount (\$) \$30.50	Payee address; City; State; Zip Code P.O. Box 758								
	PURPOSE OF EXPENDITURE		eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/12/2024	City of Pt. Neches								
	Amount (\$) \$40.00	Payee address;City;State;Zip CodeP.O. Box 758								
		Port Neches, TX 77651								
	PURPOSE OF EXPENDITURE		ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense r bill for Pt, Neches office							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp	Ol Po Pr Sa	office Overl olling Expe rinting Exp alaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Exp Transportation Equipment & Travel in District Travel Out of District OTHER (enter a category no	Related Expense	
1	Total pages Schedule F1:	2				•	3	Filer ID (Ethics 0	Commission Filers)	
	Sch: 13/26 Rpt: 42/55	[	Jefferson County Republican Par	ty				00086977	·····,	
4	Date	5	Payee name							
	08/14/2024		City of Pt. Neches							
6	Amount (\$)	7	Payee address; City;	State; Z	Zip Cod	e				
	\$70.83		P.O. Box 758							
			Port Neches, TX 77651							
8	PURPOSE	(a)	Category (See Categories listed at the top of	this schedul	le) (	b) Description				
	OF EXPENDITURE		Office Overhead/Rental Expense		-,		outsi	ide of Texas. Complete Scheo	dule T.	
	EXPENDITORE						n, TX,	, officeholder living expense		
						water bill				
_				0.0				0		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offic	ce soug	nt		Office held		
	_									
	Date		Payee name							
	07/15/2024		Comptroller of Public Accounts							
Amount (\$) Payee address; City; State; Zip Code										
	\$79.16		111 E. 17th St.							
			Austin , TX 78774-0100							
	PURPOSE	(a)	Category (See Categories listed at the top of	this schedul	le) (	b) Description				
	OF EXPENDITURE		Sales Tax					ide of Texas. Complete Sched	dule T.	
						Merchandise		, officeholder living expense		
						Werenandise	50			
	Complete ONLY if direct		andidate/Officeholder name	Offic	ce soug	ht		Office held		
	expenditure to benefit C/OI				9					
_	Date		Payee name							
	08/29/2024		DTNY							
	Amount (\$)	$\vdash$	Payee address; City;	State; Z	7in Cod	e				
	\$123.20		3148 Gulfway Dr. Ste. B	otato, 2	_ip 000	0				
	+==0.20									
	Pt. Arthur, TX 77642									
	PURPOSE	(a)				b) Description				
	OF	(a)	Category (See Categories listed at the top of Advertising Expense	this schedul	le)		outsi	ide of Texas. Complete Scheo	dule T.	
	EXPENDITURE							, officeholder living expense		
						Banner				
	Complete ONLY if direct		Candidate/Officeholder name	Offic	ce soug	ht		Office held		
	expenditure to benefit C/OI	1								

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains f	Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		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:	2	· · · ·	1000 10 001		12	Filer ID (Ethics Commission Filers)			
Ţ	Sch: 14/26 Rpt: 43/55	2	Jefferson County Republican Party			3	00086977			
4	Date	5	Payee name							
	07/05/2024		Entergy							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de					
	\$316.12		P. O. Box 8104							
			New Orleans, LA 70891							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	(alube	(b) Description					
	OF	. ,	Office Overhead/Rental Expense	cuuic)		l outs	ide of Texas. Complete Schedule T.			
	EXPENDITURE					n, TX	, officeholder living expense			
					Electric Bill					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held			
	Date		Payee name							
	09/18/2024		Evans, Joe (Mr.)							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
\$250.55 9235 Riggs St.										
			Beaumont, TX 77707							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	EXPENDITURE		Office Overhead/Rental Expense				ide of Texas. Complete Schedule T. , officeholder living expense			
					Google acco					
						Juni				
_	Complete ONLY if direct		Candidate/Officeholder name C	)ffice sou	aht		Office held			
	expenditure to benefit C/OI	H		·	0					
-	Date		Payee name							
	08/26/2024		Friesz, Gordon (Mr.)							
	Amount (\$)			Zip Co	de					
	\$1.03		2372 Calder Ave. Ste.2	p 00						
			Beaumont, TX 77702							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Donation/Fee				ide of Texas. Complete Schedule T.			
							, officeholder living expense			
					Credit Card	Ser	vice Charge			
	Complete ONUX 5 - Start	Ļ	Condidate/Office/states	)ffion (	abt		Office hold			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ynt		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explain	Office Ove Polling Ex Printing E Salaries/W	xpense Vages/Contra	al Expense act Labor		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: 15/26 Rpt: 44/55		Jefferson County Republican Party					00086977	``````````````````````````````````````	
4	Date	5	Payee name							
	08/08/2024		Greene, Pat (Ms.)							
6	Amount (\$)	7	Payee address; City; Stat	e; Zip Co	de					
	\$14.60		4400 Morningstar Pl.							
			Beaumont, TX 77705							
8	PURPOSE	(a)	Category (See Categories listed at the top of this se	chedule)	(b) Des	cription				
	OF EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Com		
						tage stam		officeholder living	expense	
					poo	lage stam	po			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght			Office he	eld	
	Date		Payee name							
	08/09/2024		Greene, Pat (Ms.)							
	Amount (\$)		Payee address; City; Stat	e; Zip Co	de					
	\$900.00		4400 Morningstar Pl.							
			Beaumont, TX 77705							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this se Advertising Expense	chedule)		Check if travel o Check if Austin,	TX,	de of Texas. Com officeholder living for Advanta	expense	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght			Office he	eld	
F	Date		Payee name							
	08/21/2024		Greene, Pat (Ms.)							
	Amount (\$)		Payee address; City; Stat	e; Zip Co	de					
	\$1,128.56		4400 Morningstar PI.							
			Beaumont, TX 77705							
	PURPOSE OF		Category (See Categories listed at the top of this se	chedule)	(b) Des	•				
	EXPENDITURE		Yard signs					de of Texas. Com officeholder living	plete Schedule T. I expense	
					Trui Van					
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght			Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office C Polling I Printing Salaries	Exper Exper Expe S/Wag	nse es/Contract Labor		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:	2					3	Filer ID (Ethics Commission Filers)		
	Sch: 16/26 Rpt: 45/55		Jefferson County Republican Party					00086977		
4	Date 08/27/2024	5	Payee name Greene, Pat (Ms.)							
6	Amount (\$)	7		e; Zip C	Code	3				
Ū	\$50.00		4400 Morningstar Pl.	о, шр с						
	Beaumont, TX 77705									
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b	Description				
	OF EXPENDITURE		Banner/deposit					ide of Texas. Complete Schedule T.		
						Pt. Neches C		, officeholder living expense		
						FL Neches C	me			
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	Office so	bugh	t		Office held		
	Date		Payee name							
	08/16/2024		Greene, Pat (Ms.)							
	Amount (\$)		Payee address; City; Stat	e; Zip C	Code	)				
	\$2.71		4400 Morningstar Pl.							
			J							
			Beaumont, TX 77705							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b	Description Check if travel	outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE		Event Expense					, officeholder living expense		
						Thank You C	ard	ls		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office so	bugh	t		Office held		
_	Date	<u> </u>								
	09/06/2024		Payee name Greene, Pat (Ms.)							
_				ou Zin C	- da					
	Amount (\$) \$100.00			e; Zip C	-ode	2				
	\$100.00		4400 Morningstar Pl.							
			Beaumont, TX 77705		_					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b	Description				
	EXPENDITURE		Annual fee					ide of Texas. Complete Schedule T.		
						Membership		, officeholder living expense		
						mennersnih	.00	GRANDEL		
	Complete ONLY if direct	Ļ	Candidate/Officeholder name	Office so		t		Office held		
	expenditure to benefit C/OI			Unice SC	Jugn	i.				

	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	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:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)							
	Sch: 17/26 Rpt: 46/55	Jefferson County Republican Party	00086977							
4	Date 09/17/2024	5 Payee name       2024       Greene, Pat (Ms.)								
6	Amount (\$) \$161.77	Payee address; City; State; Zip Code 4400 Morningstar PI. Beaumont, TX 77705								
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) For Pt. Neches office wall       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Frames for pictures										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/17/2024	Greene, Pat (Ms.)								
Amount (\$)     Payee address;     City;     State;     Zip Code       \$283.90     4400 Morningstar PI.										
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date 09/19/2024	Payee name Greene, Pat (Ms.)								
	Amount (\$) \$4.31	Payee address;       City;       State; Zip Code         4400 Morningstar PI.								
		Beaumont, TX 77705								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense es Office							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens Imittee Legal Services The Instruction Guide ex		Office Over Polling Exp Printing Exp Salaries/Wa	head ense pens ages	e /Contract Labor		Travel in District Travel Out of Dist	quipment & Related Expense
1	Total pages Schedule F1:	2	· · · · · · · · · · · · · · · · · · ·							(Ethics Commission Filers)
1	Sch: 18/26 Rpt: 47/55	2	Jefferson County Republican Pa	rty				3	00086977	
4	Date	5	Payee name							
	09/13/2024		Greene, Pat							
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le				
	\$11.41		4400 Morningstar Pl.							
			Beaumont, TX 77705							
•	DUDDOCE					(h-)				
8	PURPOSE OF	(a)	Category (See Categories listed at the top of		nedule)	(a)	Description	outci	de of Texas. Comp	aloto Schodulo T
	EXPENDITURE		Office Overhead/Rental Expense	!					officeholder living	
							water bill/ Cit		-	onponoo
								<i>.</i>		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		candidate/Officeholder name	C	Office soug	jht			Office he	ld
	Date		Payee name							
	09/13/2024		Greene, Pat							
				Ctoto	, Zin Cos	10				
	Amount (\$)		Payee address; City;	State;	; Zip Coc	e				
	\$15.51		4400 Morningstar Pl.							
			Beaumont, TX 77705							
	PURPOSE	(a)	Category (See Categories listed at the top of	f this sch	nedule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense		,		Check if travel	outsi	de of Texas. Comp	lete Schedule T.
	EXPENDITORE								officeholder living	expense
							Kitchen Supp	olies	6	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	C	Office soug	Jht			Office he	ld
	Date		Payee name							
	09/02/2024		Greene, Pat							
				<u> </u>	7. 0					
	Amount (\$)		Payee address; City;	State;	; Zip Coc	le				
	\$15.11		4400 Morningstar Pl.							
			Beaumont, TX 77705							
	PURPOSE	(a)	Category (See Categories listed at the top of	f this sch	nedule)	(b)	Description			
	OF		Office Overhead/Rental Expense		icuaic)	• •		outsi	de of Texas. Comp	lete Schedule T.
	EXPENDITURE						Check if Austin	, тх,	officeholder living	expense
							Kitchen Supp	lies	6	
-	Complete ONLY if direct	L(	andidate/Officeholder name	C	Office soug	ht			Office he	ld
	expenditure to benefit C/OI				~3	•				
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		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:	2	FILER NAME	Filer ID (Ethics Commission Filers)					
	Sch: 19/26 Rpt: 48/55		Jefferson County Republican Party				00086977		
4	Date 09/02/2024		Payee name Greene, Pat						
6	Amount (\$) \$15.33		Payee address; City; State; 4400 Morningstar PI. Beaumont, TX 77705	Zip Coo	e				
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense       (b) Description 									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Of	ffice soug	ht		Office held		
	Date		Payee name						
	09/03/2024		Greene, Pat						
	Amount (\$) \$58.50		4400 Morningstar Pl.	Zip Coo	e				
	PURPOSE OF EXPENDITURE	(a)	Beaumont, TX 77705 Category (See Categories listed at the top of this schere Event Expense	dule)		n, TX,	de of Texas. Complete Schedule T. officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Of	ffice soug	ht		Office held		
	Date		Payee name						
	09/03/2024		Greene, Pat						
	Amount (\$) \$157.92		Payee address; City; State; 4400 Morningstar PI.	Zip Coo	e				
			Beaumont, TX 77705	i					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schere Office Overhead/Rental Expense	dule)		n, TX,	de of Texas. Complete Schedule T. officeholder living expense rent		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Of	ffice soug	ht		Office held		

	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 Loan Fees Offici Food/Beverage Expense Pollir Gift/Awards/Memorials Expense Printi umittee Legal Services Salar The Instruction Guide explains how to	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:	2	FILER NAME						
	Sch: 20/26 Rpt: 49/55		Jefferson County Republican Party	00086977					
4	Date 09/05/2024		Payee name Image360						
6	Amount (\$) \$1,265.29		Payee address; City; State; Zip 3930 Phelan Blvd. Beaumont, TX 77707	O Code					
8	PURPOSE OF EXPENDITURE	OF Event Expense							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	sought			Office held		
	Date		Payee name						
	07/25/2024		Interstate Office Park						
	Amount (\$) \$1,000.00		Payee address; City; State; Zip 1844 IH10 South	) Code					
			Beaumont, TX 77707						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b)			de of Texas. Complete Schedule T. officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	sought			Office held		
	Date		Payee name						
	08/23/2024		Interstate Office Park						
	Amount (\$) \$1,000.00		Payee address; City; State; Zip 1844 IH10 South	Code					
			Beaumont, TX 77707						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b)		, тх,	de of Texas. Complete Schedule T. officeholder living expense ling Rent		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	sought			Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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:		<b>3</b> Filer ID (Ethics Commission Filers)						
-	Sch: 21/26 Rpt: 50/55	Jefferson County Republican Party	00086977						
4	Date 07/03/2024	5 Payee name JCRP							
6	Amount (\$) \$200.00	<ul> <li>Payee address; City; State; Zip Code</li> <li>1844 S IH10 Ste.102</li> <li>Beaumont, TX 77707</li> </ul>							
8	B       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.         Check if Austin, TX, officeholder living expense       transferred monies to different account								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/25/2024	Madry, Bruce (Mr.)							
	Amount (\$) \$1.90	Payee address; City; State; Zip Code 4848 Simpson Ave.							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense						
		Credit Card Se							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/10/2024	Mexican Hispanic Society							
	Amount (\$) \$200.00	Payee address; City; State; Zip Code 3308 Medical Triangle Dr.							
		Pt. Arthur , TX 77642							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Commi 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					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:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 22/26 Rpt: 51/55		Jefferson County Republic	00086977						
4	Date	5	Payee name							
	08/19/2024		Nederland Chamber of Co	ommerce						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	e				
	\$125.00		1515 Boston Ave.							
			Nederland, TX 77627							
8	PURPOSE	(a)	Category (See Categories listed a	t the top of this sch	edule)	b) Description				
	OF		Annual		icuaic)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE							, officeholder living expense		
						Membership	fee			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held		
_	Date	1								
	08/25/2024		Payee name Patton, James (Mr.)							
	Amount (\$)		Payee address; City;	State;	; Zip Coo	e				
\$1.03 4975 Sutherland										
			Beaumont, TX 77703							
	PURPOSE	(a)	Category (See Categories listed a	t the top of this sch	nedule)	b) Description				
	OF EXPENDITURE		Donation Fee			Check if travel outside of Texas. Complete Schedule T.				
								, officeholder living expense		
Credit Card Service C						vice Charge				
	Complete ONLY if direct		andidate/Officeholder name		Office soug	ht.		Office held		
	expenditure to benefit C/OF			(	Jince soug	in and a second s		Once held		
	Date		Payee name							
	08/14/2024		Pt. Neches Chamber of C	Commerce						
	Amount (\$)		Payee address; City;	State;	; Zip Coo	e				
	\$100.00		1110 Port Neches Ave.							
	Pt. Neches, TX 77651									
	PURPOSE	(a)	Category (See Categories listed a	t the top of this sch	nedule)	b) Description				
	OF EXPENDITURE		Annual Fee					ide of Texas. Complete Schedule T.		
							I, TX,	, officeholder living expense		
						Membership				
	Osmalata Obli Milli "	L			245-	1- 4				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	nt		Office held		
	,									

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Commi Credit Card Payment									raising Expense quipment & Related Expense strict category not listed above)
1	Total pages Schedule F1:	2 F		•		•	3	Filer ID	(Ethics Commission Filers)
-	Sch: 23/26 Rpt: 52/55		efferson County Republica	an Party			ľ	00086977	(
4	Date 08/16/2024		ayee name ETXRW						
6	Amount (\$) \$25.00	P	ayee address; City; .O. Box 1071 lederland, TX 77627	State;	Zip Co	le			
8	PURPOSE OF EXPENDITURE		ategory (See Categories listed at vent Expense	the top of this sch	edule)			de of Texas. Com officeholder living	plete Schedule T. expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	ht		Office he	eld
	Date 09/12/2024		ayee name ETXRW						
	Amount (\$) \$25.00	P	ayee address; City; .O. Box 1071 lederland, TX 77627	State;	Zip Co	le			
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at vent Expense	the top of this sch	edule)			de of Texas. Com officeholder living	plete Schedule T. expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	ht		Office he	eld
	Date	Ρ	ayee name						
	07/10/2024	s	holette, Melaine (Ms.)						
	Amount (\$) \$200.00		ayee address; City; 2 McFadden Road	State;	Zip Co	le			
			luntsville, TX 77340						
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at vent Expense	the top of this sch	edule)	Check if Austir	n, TX,	officeholder living	plete Schedule T. expense ate Carroll video
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Dffice sou	ht		Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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:	2 EILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)						
-	Sch: 24/26 Rpt: 53/55	Jefferson County Republican Party	00086977						
4	Date	5 Payee name							
	07/15/2024	Spectrum							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$30.80	P.O. Box 60074							
		City of Industry, CA 91716-0074							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF		utside of Texas. Complete Schedule T.						
	EXPENDITURE		TX, officeholder living expense						
		Internet/websi	te						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/08/2024	Spectrum							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$75.38	P.O. Box 60074							
	φ/0.30	P.O. B0x 00074							
		City of Industry, CA 91716-0074							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense						
		Internet/websi	te						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/06/2024	Spectrum							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$229.81	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	utside of Texas. Complete Schedule T.						
	EXPENDITURE		TX, officeholder living expense						
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held						
	expenditure to benefit C/OF								

				EXPENDITUR	RE CATEGO	RIES FOR	BO	)X 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee 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					Solicitation/Fund Transportation E Travel in District Travel Out of Dis OTHER (enter a	quipment &	Related Expense	
1	Total pages Schedule F1: 2 FILER NAM			AME						Filer ID	(Ethics C	commission Filers)
	Sch: 25/26 Rpt: 54/55		Jefferson C	ounty Republica	an Party					00086977		
4	Date 09/09/2024		Payee name Spectrum									
6	Amount (\$) \$75.39		Payee addres P.O. Box 60 City of Indus			; Zip Coo	le					
8	PURPOSE OF EXPENDITURE			e Categories listed at nead/Rental Ex		nedule)			, TX, (	le of Texas. Com officeholder living eches Office	expense	ule T.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offi	ceholder name	(	Office sou	jht			Office he	eld	
	Date		Payee name									
	07/10/2024		Stellar Bank									
	Amount (\$) \$99.87		Payee addres 2008 Hwy. 3	-	State	; Zip Coo	le					
			Nederland,	TX 77627								
	PURPOSE OF EXPENDITURE			e Categories listed at nead/Rental Ex		nedule)				le of Texas. Com officeholder living		ule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offi	ceholder name	(	Office souç	jht			Office he	eld	
	Date		Payee name									
	09/26/2024	·	The Examin	er								
	Amount (\$) \$1,000.00		Payee addres 795 Willow	ss; City;	State	; Zip Coo	le					
			Beaumont, <sup>-</sup>	TX 77701								
	PURPOSE OF EXPENDITURE		Category <sub>(Se</sub> Advertising	e Categories listed at Expense	the top of this sch	nedule)			, TX, (	le of Texas. Com officeholder living		ule T.
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Offi	ceholder name	C	Office soug	jht			Office he	eld	