

COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

FORM CEC
COVER SHEET PG 1

The CEC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00086977	2 Total pages filed: 55
3 COMMITTEE NAME Jefferson County Republican Party			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 09/28/2024 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 148 South Dowlen Rd. #627 Beaumont, TX 77707		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Patricia NICKNAME LAST SUFFIX Greene		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4400 Morning Star Pl. Beaumont, TX 77705		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4400 Morning Star Pl. Beaumont, TX 77705		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (409) 626-2585		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Final Report <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year 07/01/2024 THROUGH Month Day Year 09/26/2024		
11 ELECTION	ELECTION DATE Month Day Year 11/05/2024	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

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COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC
COVER SHEET PG 2

12 COMMITTEE NAME Jefferson County Republican Party		13 Filer ID (Ethics Commission Filers) 00086977
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Republican
		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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,144.28
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 11,338.62
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 192,802.06
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Ms. Patricia Greene

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - CEC**FORM CEC**
COVER SHEET PG 3
3 of 55

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/23 Rpt: 4/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aaran, Allen (Mr.) 6 Contributor address; City; State; Zip Code Vidor, TX 77640	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Jackson (Mr.) Contributor address; City; State; Zip Code Beaumont, TX 77713	Amount of Contribution (\$) \$190.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Jackson (Mr.) Contributor address; City; State; Zip Code Beaumont, TX 77713	Amount of Contribution (\$) \$610.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Jackson (Mr.) Contributor address; City; State; Zip Code Beaumont, TX 77713	Amount of Contribution (\$) \$74.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Robert (Mr.) Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$54.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/23 Rpt: 5/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Affolter, Susan (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Hampshire, TX 77622	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions)
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Sharon (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Don (Mr.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beavers, Susan (Ms.) <hr/> Contributor address; City; State; Zip Code Nome, TX 77629	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Janet (Ms.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Case Worker		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/23 Rpt: 6/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr , DINA (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77705	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr , DINA (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Jim (Mr.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Construction Director		Employer (See Instructions)
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooksey, Paul (Ms.) <hr/> Contributor address; City; State; Zip Code Winnie, TX 77665	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davalos, Darren (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Refinery Worker		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/23 Rpt: 7/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dishman, Cindy (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77706	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Housewife		9 Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dishman, Cindy (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Housewife		Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donald, Wendy (Ms.) <hr/> Contributor address; City; State; Zip Code Village Mills , TX 77663	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Pro Shop		Employer (See Instructions)
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duhon, Pat (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Cary (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/23 Rpt: 9/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faraci, Danielle (Ms.) 6 Contributor address; City; State; Zip Code Beaumont, TX 77705	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figari, Stephanie (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Housewife		Employer (See Instructions)
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fontenot, Allison (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$63.00
Principal occupation / Job title (See Instructions) Operator		Employer (See Instructions)
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friesz, Gordon (Judge) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) 317 District of Texas		Employer (See Instructions)
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friesz, Gordon (Judge) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) 317 District of Texas		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/23 Rpt: 10/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friesz, Gordon (Judge)	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Nederland, TX 77627		
8 Principal occupation / Job title (See Instructions) 317 District of Texas		9 Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Jiovanny (Mr.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Groves, TX 77619		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Donna (Ms.)	Amount of Contribution (\$) \$122.00
Contributor address; City; State; Zip Code Nederland, TX 77627		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Beaumont, TX 77705		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat	Amount of Contribution (\$) \$26.50
Contributor address; City; State; Zip Code Beaumont, TX 77705		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/23 Rpt: 11/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77705	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Patricia (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Patricia (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$21.03
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/23 Rpt: 12/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Patricia (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77705	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) none
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Roger (Mr.) <hr/> Contributor address; City; State; Zip Code Lumberton, TX 77654	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ann (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ann (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ann (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/23 Rpt: 13/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ann (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammett, Mary Ann (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hargraves, Carl (Mr.) <hr/> Contributor address; City; State; Zip Code Winnie, TX 77765	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Loan Officer		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harvey, Sharon (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecht, Bill (Mr.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/23 Rpt: 14/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 07/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Elaine (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77706	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Elaine (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Elaine (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Elaine (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinds, Holly (Ms.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/23 Rpt: 15/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isles, George (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Lumberton, TX 77657	7 Amount of Contribution (\$) \$345.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JCRP <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Patti (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$59.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim, Linda (Ms.) <hr/> Contributor address; City; State; Zip Code Lumberton, TX 77657	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kozinski, Brian (Mr.) <hr/> Contributor address; City; State; Zip Code Deweyville, TX 77614	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/23 Rpt: 16/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaRocca, Becky (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77708	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langham, Tonya (Mr.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Assistant Manager		Employer (See Instructions)
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Brian (Mr.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Paul (Mr.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindstrom, Kevin (Mr.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/23 Rpt: 17/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacKenzie, Elizabeth (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77707	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madry, Bruce (Mr.) <hr/> Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Industrial Worker		Employer (See Instructions)
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madry, Bruce (Mr.) <hr/> Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Industrial Worker		Employer (See Instructions)
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madry, Bruce (Mr.) <hr/> Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Industrial Worker		Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madry, Bruce (Mr.) <hr/> Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Industrial Worker		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/23 Rpt: 18/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayes, Pat (Ms.) 6 Contributor address; City; State; Zip Code Beaumont, TX 77706	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Danny (Mr.) Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Deilyn (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffitt, Sammie (Mr.) Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Debbie (Ms.) Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$74.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/23 Rpt: 19/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Cynthia (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Lumberton, TX 77657	7 Amount of Contribution (\$) \$28.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munro, Mary (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont , TX 77707	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munro, Mary (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont , TX 77707	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munro, Mary (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont , TX 77707	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munro, Mary (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont , TX 77707	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/23 Rpt: 20/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 07/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholas, Linda (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Pt. NECHES, TX 77651	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholas, Linda (Ms.) <hr/> Contributor address; City; State; Zip Code Pt. NECHES, TX 77651	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nixon, Bettie (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacetti, Rodney (Mr.) <hr/> Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacetti, Rodney (Mr.) <hr/> Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/23 Rpt: 21/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacetti, Rodney (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Groves, TX 77619	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patton, James (Mr.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patton, James (Mr.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patton, James (Mr.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poindexter, Debra (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/23 Rpt: 22/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poindexter, Debra (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poindexter, Debra (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poindexter, Debra (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Nancy (Ms.) <hr/> Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Chris (Mr.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Oil Worker		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/23 Rpt: 23/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronquille, Velma (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77713	7 Amount of Contribution (\$) \$83.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SETXRW <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$5.58
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SETXRW <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$88.82
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shearer, Phyllis (Ms.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$28.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simoneaux, Clifton (Mr.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Imaging Director		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/23 Rpt: 24/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 08/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simoneaux, Clifton (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Imaging Director		9 Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simoneaux, Clifton (Mr.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Imaging Director		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simoneaux, Clifton (Mr.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Imaging Director		Employer (See Instructions)
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Cindy (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77713	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Patient Scheduler		Employer (See Instructions)
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sandra <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/23 Rpt: 25/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velaso, Heather (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$44.00
8 Principal occupation / Job title (See Instructions) phybottomist		9 Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Mary (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Jan (Ms.) <hr/> Contributor address; City; State; Zip Code Bridge City, TX 77611	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Ricky (Mr.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions)
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Thomas (Mr.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Fireman		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/23 Rpt: 26/55
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Curtis (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77706	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions)
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jay (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Justice of Appeals		Employer (See Instructions)
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jay (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Justice of Appeals		Employer (See Instructions)
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jay (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Justice of Appeals		Employer (See Instructions)
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Winfred (Mr.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/3 Rpt: 27/55	
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 07/15/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr , DINA (Ms.) 7 Contributor address; City; State; Zip Code Beaumont, TX 77705	8 Amount of contribution (\$) \$23.79 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	9 In-kind contribution description
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's 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 contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr , DINA (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of contribution (\$) \$6.50 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description Sympathy Cards
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		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 contributor'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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of contribution (\$) \$2.71 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description Sympathy Cards
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		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 contributor'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

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 2/3 Rpt: 28/55	
2 FILER NAME Jefferson County Republican Party				3 Filer ID (Ethics Commission Filers) 00086977	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 09/02/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat <hr/> 7 Contributor address; City; State; Zip Code Beaumont, TX 77705		8 Amount of contribution (\$) \$15.11	9 In-kind contribution description Kitchen Supplies	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired			11 Employer (FOR NON-JUDICIAL) (See instructions)		
12 Contributor's 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 contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705		Amount of contribution (\$) \$15.33	In-kind contribution description Knobs for kitchen cabinets	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired			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 contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705		Amount of contribution (\$) \$4.31	In-kind contribution description keys for Pt. Neches office	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired			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 contributor'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

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 3/3 Rpt: 29/55	
2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 08/08/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Patricia (Ms.) 7 Contributor address; City; State; Zip Code Beaumont, TX 77705	8 Amount of contribution (\$) \$14.60	9 In-kind contribution description book of postage stamps
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See instructions) none	
12 Contributor's 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 contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/26 Rpt: 30/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 07/10/2024	5 Payee name 2022 Block Inc	
6 Amount (\$) \$5.71	7 Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2024	Payee name 2022 Block Inc	
Amount (\$) \$1.03	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/17/2024	Payee name 2022 Block Inc	
Amount (\$) \$1.90	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/26 Rpt: 31/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 07/18/2024	5 Payee name 2022 Block Inc	
6 Amount (\$) \$2.06	7 Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/23/2024	Candidate/Officeholder name Office sought Office held	
Payee name 2022 Block Inc		
Amount (\$) \$1.03	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/24/2024	Candidate/Officeholder name Office sought Office held	
Payee name 2022 Block Inc		
Amount (\$) \$2.93	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/26 Rpt: 32/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 07/30/2024	5 Payee name 2022 Block Inc	
6 Amount (\$) \$0.79	7 Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service charge
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/05/2024	Candidate/Officeholder name Payee name 2022 Block Inc	
Amount (\$) \$7.74	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card service charges
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/12/2024	Candidate/Officeholder name Payee name 2022 Block Inc	
Amount (\$) \$6.34	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Services fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/26 Rpt: 33/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 08/13/2024	5 Payee name 2022 Block Inc	
6 Amount (\$) \$1.03	7 Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/15/2024	Candidate/Officeholder name Office sought Office held	
Payee name 2022 Block Inc		
Amount (\$) \$1.03	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/19/2024	Candidate/Officeholder name Office sought Office held	
Payee name 2022 Block Inc		
Amount (\$) \$1.03	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/26 Rpt: 34/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 08/23/2024	5 Payee name 2022 Block Inc	
6 Amount (\$) \$2.93	7 Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card service charges
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/23/2024	Payee name 2022 Block Inc	
Amount (\$) \$2.93	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2024	Payee name 2022 Block Inc	
Amount (\$) \$4.38	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/26 Rpt: 35/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/12/2024	5 Payee name 2022 Block Inc	
6 Amount (\$) \$3.65	7 Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/12/2024	Candidate/Officeholder name	Office sought
Amount (\$) \$1.03	Payee name 2022 Block Inc	
	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/12/2024	Candidate/Officeholder name	Office sought
Amount (\$) \$0.98	Payee name 2022 Block Inc	
	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/12/2024	Candidate/Officeholder name	Office sought
Amount (\$) \$0.98	Payee name 2022 Block Inc	
	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/26 Rpt: 36/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/12/2024	5 Payee name 2022 Block Inc	
6 Amount (\$) \$1.03	7 Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/13/2024	Candidate/Officeholder name Office sought Office held	
Payee name 2022 Block Inc		
Amount (\$) \$1.03	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/14/2024	Candidate/Officeholder name Office sought Office held	
Payee name 2022 Block Inc		
Amount (\$) \$1.90	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/26 Rpt: 37/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/18/2024	5 Payee name 2022 Block Inc	
6 Amount (\$) \$1.03	7 Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/23/2024	Candidate/Officeholder name Office sought Office held	
Payee name 2022 Block Inc		
Amount (\$) \$1.03	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/24/2024	Candidate/Officeholder name Office sought Office held	
Payee name 2022 Block Inc		
Amount (\$) \$2.93	Payee address; City; State; Zip Code 1455 Market St. Ste. 600 san Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/26 Rpt: 38/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 08/21/2024	5 Payee name Beaumont Pet Alive	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 46718 I 10 winnie , TX 77665	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In memory of Mark Steinhagen
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/24/2024	Candidate/Officeholder name Beaumont chamber of Commerce	
Amount (\$) \$250.00	Office sought 1110 Park St. Beaumont, TX 77701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Annual fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/21/2024	Candidate/Officeholder name Beaumont chamber of Commerce	
Amount (\$) \$600.00	Office sought 1110 Park St. Beaumont, TX 77701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/table Legislative Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/26 Rpt: 39/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/16/2024	5 Payee name Bordelon, Michael	
6 Amount (\$) \$20.76	7 Payee address; City; State; Zip Code 2924. Avel L Nederland, TX 77627	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Paint	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Repair wall Pt. Neche Office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2024	Payee name CARR, DINA (Ms.)	
Amount (\$) \$23.79	Payee address; City; State; Zip Code 2225 Stillwater Dr. Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toolbox
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/20/2024	Payee name CARR, DINA (Ms.)	
Amount (\$) \$240.14	Payee address; City; State; Zip Code 2225 Stillwater Dr. Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Invoice
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/26 Rpt: 40/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 08/20/2024	5 Payee name CARR, DINA (Ms.)	
6 Amount (\$) \$202.81	7 Payee address; City; State; Zip Code 2225 Stillwater Dr. Beaumont, TX 77705	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google invoice
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/09/2024	Payee name CARR, DINA (Ms.)	
Amount (\$) \$6.50	Payee address; City; State; Zip Code 2225 Stillwater Dr. Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gell Well Cards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name CARR, DINA (Ms.)	
Amount (\$) \$61.81	Payee address; City; State; Zip Code 2225 Stillwater Dr. Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candy
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/26 Rpt: 41/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/17/2024	5 Payee name CARR, DINA (Ms.)	
6 Amount (\$) \$60.53	7 Payee address; City; State; Zip Code 2225 Stillwater Dr. Beaumont, TX 77705	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Replace light bulbs/Pt. Neches
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/12/2024	Payee name City of Pt. Neches	
Amount (\$) \$30.50	Payee address; City; State; Zip Code P.O. Box 758 Port Neches, TX 77651	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense water bill
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/12/2024	Payee name City of Pt. Neches	
Amount (\$) \$40.00	Payee address; City; State; Zip Code P.O. Box 758 Port Neches, TX 77651	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense water bill for Pt, Neches office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/26 Rpt: 42/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 08/14/2024	5 Payee name City of Pt. Neches	
6 Amount (\$) \$70.83	7 Payee address; City; State; Zip Code P.O. Box 758 Port Neches, TX 77651	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense water bill
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2024	Payee name Comptroller of Public Accounts	
Amount (\$) \$79.16	Payee address; City; State; Zip Code 111 E. 17th St. Austin , TX 78774-0100	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Sales Tax	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise Sales
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2024	Payee name DTNY	
Amount (\$) \$123.20	Payee address; City; State; Zip Code 3148 Gulfway Dr. Ste. B Pt. Arthur, TX 77642	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/26 Rpt: 43/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 07/05/2024	5 Payee name Entergy	
6 Amount (\$) \$316.12	7 Payee address; City; State; Zip Code P. O. Box 8104 New Orleans, LA 70891	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Electric Bill
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/18/2024	Payee name Evans, Joe (Mr.)	
Amount (\$) \$250.55	Payee address; City; State; Zip Code 9235 Riggs St. Beaumont, TX 77707	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google account
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/26/2024	Payee name Friesz, Gordon (Mr.)	
Amount (\$) \$1.03	Payee address; City; State; Zip Code 2372 Calder Ave. Ste.2 Beaumont, TX 77702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation/Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/26 Rpt: 44/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 08/08/2024	5 Payee name Greene, Pat (Ms.)	
6 Amount (\$) \$14.60	7 Payee address; City; State; Zip Code 4400 Morningstar Pl. Beaumont, TX 77705	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage stamps
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/09/2024	Payee name Greene, Pat (Ms.)	
Amount (\$) \$900.00	Payee address; City; State; Zip Code 4400 Morningstar Pl. Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Advantage bill
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/21/2024	Payee name Greene, Pat (Ms.)	
Amount (\$) \$1,128.56	Payee address; City; State; Zip Code 4400 Morningstar Pl. Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Yard signs	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Trump Vance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/26 Rpt: 45/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 08/27/2024	5 Payee name Greene, Pat (Ms.)	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 4400 Morningstar Pl. Beaumont, TX 77705	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Banner/deposit	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pt. Neches Office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/16/2024	Payee name Greene, Pat (Ms.)	
Amount (\$) \$2.71	Payee address; City; State; Zip Code 4400 Morningstar Pl. Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thank You Cards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/06/2024	Payee name Greene, Pat (Ms.)	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 4400 Morningstar Pl. Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Annual fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership to chamber
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/26 Rpt: 46/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/17/2024	5 Payee name Greene, Pat (Ms.)	
6 Amount (\$) \$161.77	7 Payee address; City; State; Zip Code 4400 Morningstar Pl. 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Frames for pictures
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name Greene, Pat (Ms.)	
Amount (\$) \$283.90	Payee address; City; State; Zip Code 4400 Morningstar Pl. Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 Pl. Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Keys	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For Pt. Neches Office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/26 Rpt: 47/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/13/2024	5 Payee name Greene, Pat	
6 Amount (\$) \$11.41	7 Payee address; City; State; Zip Code 4400 Morningstar Pl. Beaumont, TX 77705	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense water bill/ City Pt. Neches
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/13/2024	Payee name Greene, Pat	
Amount (\$) \$15.51	Payee address; City; State; Zip Code 4400 Morningstar Pl. Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kitchen Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/02/2024	Payee name Greene, Pat	
Amount (\$) \$15.11	Payee address; City; State; Zip Code 4400 Morningstar Pl. Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kitchen Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/26 Rpt: 48/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/02/2024	5 Payee name Greene, Pat	
6 Amount (\$) \$15.33	7 Payee address; City; State; Zip Code 4400 Morningstar Pl. Beaumont, TX 77705	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Knobs for kitchen cabinets
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Greene, Pat	
Amount (\$) \$58.50	Payee address; City; State; Zip Code 4400 Morningstar Pl. Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense merchandise
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Greene, Pat	
Amount (\$) \$157.92	Payee address; City; State; Zip Code 4400 Morningstar Pl. Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mail Box annual rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/26 Rpt: 49/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/05/2024	5 Payee name Image360	
6 Amount (\$) \$1,265.29	7 Payee address; City; State; Zip Code 3930 Phelan Blvd. Beaumont, TX 77707	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign signs
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/25/2024	Payee name Interstate Office Park	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1844 IH10 South Beaumont, TX 77707	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense August Rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/23/2024	Payee name Interstate Office Park	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1844 IH10 South Beaumont, TX 77707	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense September Building Rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/26 Rpt: 50/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 07/03/2024	5 Payee name JCRP	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 1844 S IH10 Ste.102 Beaumont, TX 77707	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense transferred monies to different account
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/25/2024	Payee name Madry, Bruce (Mr.)	
Amount (\$) \$1.90	Payee address; City; State; Zip Code 4848 Simpson Ave. Groves, TX 77619	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/10/2024	Payee name Mexican Hispanic Society	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 3308 Medical Triangle Dr. Pt. Arthur , TX 77642	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Table Rental
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/26 Rpt: 51/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 08/19/2024	5 Payee name Nederland Chamber of Commerce	
6 Amount (\$) \$125.00	7 Payee address; City; State; Zip Code 1515 Boston Ave. Nederland, TX 77627	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Annual	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/25/2024	Candidate/Officeholder name Payee name Patton, James (Mr.)	
Amount (\$) \$1.03	Office sought Payee address; City; State; Zip Code 4975 Sutherland Beaumont, TX 77703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/14/2024	Candidate/Officeholder name Payee name Pt. Neches Chamber of Commerce	
Amount (\$) \$100.00	Office sought Payee address; City; State; Zip Code 1110 Port Neches Ave. Pt. Neches, TX 77651	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Annual Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/26 Rpt: 52/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 08/16/2024	5 Payee name SETXRW	
6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code P.O. Box 1071 Nederland, TX 77627	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/12/2024	Candidate/Officeholder name Office sought Office held	
Payee name SETXRW		
Amount (\$) \$25.00	Payee address; City; State; Zip Code P.O. Box 1071 Nederland, TX 77627	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/10/2024	Candidate/Officeholder name Office sought Office held	
Payee name Sholette, Melaine (Ms.)		
Amount (\$) \$200.00	Payee address; City; State; Zip Code 22 McFadden Road Huntsville, TX 77340	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimburse her paying for Kate Carroll video
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/26 Rpt: 53/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 07/15/2024	5 Payee name Spectrum	
6 Amount (\$) \$30.80	7 Payee address; City; State; Zip Code P.O. Box 60074 City of Industry, CA 91716-0074	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Service	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet/website
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/08/2024	Candidate/Officeholder name Office sought Office held	
Payee name Spectrum		
Amount (\$) \$75.38	Payee address; City; State; Zip Code P.O. Box 60074 City of Industry, CA 91716-0074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet/website
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/06/2024	Candidate/Officeholder name Office sought Office held	
Payee name Spectrum		
Amount (\$) \$229.81	Payee address; City; State; Zip Code P.O. Box 60074 City of Industry, CA 91716-0074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet/web
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/26 Rpt: 54/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/09/2024	5 Payee name Spectrum	
6 Amount (\$) \$75.39	7 Payee address; City; State; Zip Code P.O. Box 60074 City of Industry, CA 91716-0074	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense internet for Pt. Neches Office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/10/2024	Payee name Stellar Bank	
Amount (\$) \$99.87	Payee address; City; State; Zip Code 2008 Hwy. 365 Nederland, TX 77627	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense check order
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/26/2024	Payee name The Examiner	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 795 Willow Beaumont, TX 77701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor Day Ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 26/26 Rpt: 55/55	2 FILER NAME Jefferson County Republican Party	3 Filer ID (Ethics Commission Filers) 00086977
4 Date 09/16/2024	5 Payee name The Mega Mall	
6 Amount (\$) \$104.32	7 Payee address; City; State; Zip Code 2740 SW Martin Downs Blvd. #331 Palm City , FL 34990	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/06/2024	Payee name Zuzukin, Shaya (Ms.)	
Amount (\$) \$175.00	Payee address; City; State; Zip Code 405 N. 14th St. Beaumont, TX 77702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Wrote check on wrong account	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense should have written on different account
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held