

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) 00083126	2 Total pages filed: 15
3 COMMITTEE NAME Montgomery County GOP		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/14/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 18001 Highway 105 W Ste 102 Montgomery, TX 77356-2881	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Mr. Charles R.	
		NICKNAME LAST SUFFIX Shirley	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3226 W. Benders Landing Blvd. Spring, TX 77386	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3226 W. Benders Landing Blvd. Spring, TX 77386	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (713) 854-7546	
9 REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final Report <input checked="" 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 Month Day Year 05/19/2024 THROUGH 06/30/2024	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 11/05/2024 <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 Montgomery County GOP	13 Filer ID (Ethics Commission Filers) 00083126
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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	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 998.70
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,446.09
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 41,116.81
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.

Mr. Charles R. Shirley

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

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE

**FORM CEC
ADDENDUM**

Page 3 of 15

12 COMMITTEE NAME Montgomery County GOP		13 Filer ID (Ethics Commission Filers) 00083126
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
		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.)	Republican

SUBTOTALS - CEC**FORM CEC**
COVER SHEET PG 3
4 of 15

17 COMMITTEE NAME Montgomery County GOP		18 Filer ID 00083126	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	993.14
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	5.56
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	\$	1,446.09
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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	0.25

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/4 Rpt: 5/15
2 FILER NAME Montgomery County GOP		3 Filer ID (Ethics Commission Filers) 00083126
4 Date 06/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Elizabeth (Ms.)	7 Amount of Contribution (\$) \$23.23
	6 Contributor address; City; State; Zip Code Shenandoah, TX 77381-1032	
8 Principal occupation / Job title (See Instructions) Housewife		9 Employer (See Instructions) Retired
Date 06/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brasher, William "Web" (Mr.)	Amount of Contribution (\$) \$20.22
	Contributor address; City; State; Zip Code Montgomery, TX 77316	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cady, Phill (Mr.)	Amount of Contribution (\$) \$24.24
	Contributor address; City; State; Zip Code Conroe, TX 77302-4507	
Principal occupation / Job title (See Instructions) Airplane Mechanic		Employer (See Instructions) Retired
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cady, Phill (Mr.)	Amount of Contribution (\$) \$24.24
	Contributor address; City; State; Zip Code Conroe, TX 77302-4507	
Principal occupation / Job title (See Instructions) Airplane Mechanic		Employer (See Instructions) Retired
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Samuel (Mr.)	Amount of Contribution (\$) \$23.23
	Contributor address; City; State; Zip Code Spring, TX 77389	
Principal occupation / Job title (See Instructions) Tech & Lab Support Specialist		Employer (See Instructions) Huntsman

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 6/15
2 FILER NAME Montgomery County GOP		3 Filer ID (Ethics Commission Filers) 00083126
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haag, Theresa (Ms.)	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Spring, TX 77386-2200		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hord, Lonna (Ms.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Montgomery, TX 77316		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Kendall Executive Support Srvs
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hyde, George (Mr.)	Amount of Contribution (\$) \$20.20
Contributor address; City; State; Zip Code Spring, TX 77386-3788		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Retired
Date 06/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inman, Dale (Rev.)	Amount of Contribution (\$) \$20.22
Contributor address; City; State; Zip Code Conroe, TX 77304-2732		
Principal occupation / Job title (See Instructions) Pastor & Rancher		Employer (See Instructions) Self-Employed
Date 06/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Steven (Mr.)	Amount of Contribution (\$) \$24.24
Contributor address; City; State; Zip Code The Woodlands, TX 77381-2624		
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 7/15
2 FILER NAME Montgomery County GOP		3 Filer ID (Ethics Commission Filers) 00083126
4 Date 06/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millen, Brigetta (Ms.)	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Montgomery, TX 77316-2870	
8 Principal occupation / Job title (See Instructions) Legis Coord		9 Employer (See Instructions) Act America
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Railey, Lisa (Ms.)	Amount of Contribution (\$) \$20.22
	Contributor address; City; State; Zip Code Montgomery, TX 77316-6860	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Jim Henry Enterprises
Date 06/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santini, Vince (Judge)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Conroe, TX 77384	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Montgomery County, TX
Date 06/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirley, Charles (Mr.)	Amount of Contribution (\$) \$20.22
	Contributor address; City; State; Zip Code Spring, TX 77386-1890	
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Aidan Capital Management
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirley, Charles (Mr.)	Amount of Contribution (\$) \$24.23
	Contributor address; City; State; Zip Code Spring, TX 77386-1890	
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Aidan Capital Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 8/15
2 FILER NAME Montgomery County GOP		3 Filer ID (Ethics Commission Filers) 00083126
4 Date 06/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VonRoble, Richard (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Spring, TX 77386-3409	
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) VonRoble Consulting, Inc.
Date 06/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wertz, John (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Spring, TX 77382-1720	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Herschel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Montgomery, TX 77356-5445	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Herschel (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Montgomery, TX 77356-5445	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jay (Judge)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Conroe, TX 77302-3801	
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions) Ninth Court of Appeals

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 9/15	
2 FILER NAME Montgomery County GOP		3 Filer ID (Ethics Commission Filers) 00083126	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/22/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirley, Charles (Mr.)	8 Amount of contribution (\$) \$5.56	9 In-kind contribution description Photocopies for organizational meeting.
	7 Contributor address; City; State; Zip Code Spring, TX 77386-1890		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Real Estate Investor		11 Employer (FOR NON-JUDICIAL) (See instructions) Aidan Capital Management	
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)			

Check if travel outside of Texas. Complete Schedule T.

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: 1/5 Rpt: 10/15	2 FILER NAME Montgomery County GOP	3 Filer ID (Ethics Commission Filers) 00083126
4 Date 06/29/2024	5 Payee name Calendar Whiz	
6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code 45 Lafayette Road Suite 312 North Hampton, NH 03862	
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 Software fees.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/17/2024	Payee name Constant Contact	
Amount (\$) \$99.14	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451-7333	
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 Software fees.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/28/2024	Payee name Facebook	
Amount (\$) \$27.98	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
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 Software fees.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political 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: 2/5 Rpt: 11/15	2 FILER NAME Montgomery County GOP	3 Filer ID (Ethics Commission Filers) 00083126
4 Date 06/05/2024	5 Payee name Fike, Doris (Ms.)	
6 Amount (\$) \$136.50	7 Payee address; City; State; Zip Code 7417 Mango Orchard Lane Conroe, TX 77304-5199	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Thank you cards	(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 the purchase of thank you cards for the party.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/12/2024	Payee name KC Events Hall	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 2655 Fm 1488 Road Conroe, TX 77384	
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 Meeting room rental for CEC meeting.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/24/2024	Payee name KC Events Hall	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 2655 Fm 1488 Road Conroe, TX 77384	
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 Meeting room rental for CEC meeting.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political 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: 3/5 Rpt: 12/15	2 FILER NAME Montgomery County GOP	3 Filer ID (Ethics Commission Filers) 00083126
4 Date 06/13/2024	5 Payee name PayPal	
6 Amount (\$) \$5.99	7 Payee address; City; State; Zip Code 2211 N First Street San Jose, CA 95131-2021	
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 Software fees.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/12/2024	Payee name Square Space, Inc.	
Amount (\$) \$23.38	Payee address; City; State; Zip Code 225 Varick Street 12th Floor New York, NY 10014	
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 Software fee.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/27/2024	Payee name Stripe	
Amount (\$) \$20.85	Payee address; City; State; Zip Code 510 Townsend Street San Francisco, CA 94103-4918	
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 Software fees.
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: 4/5 Rpt: 13/15	2 FILER NAME Montgomery County GOP	3 Filer ID (Ethics Commission Filers) 00083126
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4 Date 06/24/2024	5 Payee name TRCCA
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6 Amount (\$) \$99.00	7 Payee address; City; State; Zip Code 1108 Lavaca Street Suite 110 - Box 658 Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Membership 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 One year membership fee for MCTXGOP Chair in TRCCA.
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/17/2024	Payee name United States Post Office
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Amount (\$) \$108.00	Payee address; City; State; Zip Code 809 W Dallas St Conroe, TX 77301
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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 Mailbox rental fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/27/2024	Payee name White, Karen (Ms.)
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Amount (\$) \$212.61	Payee address; City; State; Zip Code 20612 Southwood Oaks Drive Porter, TX 77365
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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 Reimbursement for costs at MCTXGOP organizational meeting.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 5/5 Rpt: 14/15	2 FILER NAME Montgomery County GOP	3 Filer ID (Ethics Commission Filers) 00083126
4 Date 05/28/2024	5 Payee name Williams, Jackie (Ms.)	
6 Amount (\$) \$297.64	7 Payee address; City; State; Zip Code 33222 Katy Lee Lane Magnolia, TX 77354	
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 Reimbursement for cost of table and chair rental for the Crawfish Boil event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 15/15
2 FILER NAME Montgomery County GOP		3 Filer ID (Ethics Commission Filers) 00083126
4 Date 06/28/2024	5 Name of person from whom amount is received Sunflower Bank	8 Amount (\$) \$0.25
	6 Address of person from whom amount is received; City; State; Zip Code Shenandoah, TX 77381	
	7 Purpose for which amount is received Interest on checking account	<input type="checkbox"/> Check if political contribution returned to filer