FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00018747 3 COMMITTEE NAME **OFFICE USE ONLY** The Republican Club of Bee County PAC Date Received **ELECTRONICALLY FILED** 07/14/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 1848 Date Hand-delivered or Date Postmarked Change of Address Beeville, TX 78104 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Fred W. NAME NICKNAME LAST **SUFFIX** Stark Ш STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2785 Earls Trl. STREET **ADDRESS** (Residence or Business) Beeville, TX 78102 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2785 Earls Trl. MAILING **ADDRESS** Beeville, TX 78102 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (361) 354-0165 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 05/19/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
The Republican Club	00018747			
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. Donald Trump		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	5.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	1,977.53
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	122,617.15
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	1		ı	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Fred \	W. Stark III	
		Signature of Car	mpaign Treasur	er
AFFIX NOTAR	Y STAMP / SEAL ABOVE			
Sworn to and subscribe	d before me, by the said	, tł	nis the	day
		which, witness my hand and seal of office.		
Signature of officer a	dministering oath	Printed name of officer administering oath	Title of office	er administering oath
Signature of officer d	ammistering battl	i inited riame of onicer administrating oath	THE OF UTILL	or auministering odul

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3 3 of 12

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17 COMMITTEE NAME 18 Filer ID (Ethics Commi								
The	e Repu							
	HEDUL ME OF	SUBTOTA	AL AMOUNT					
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	5.00			
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00			
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00			
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR	\$				
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$				
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$				
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$				
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$				
9.	X	SCHEDULE E: LOANS		\$	0.00			
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	1,977.53			
11.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00			
12.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00			
13.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00			
14.	Х	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	763.09			
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$				
				_1				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/12	
2	FILER NAME	can Club of Bee County PAC		3 Filer ID (Ethics Commission Filers) 00018747
4	Date 05/29/2024	5 Full name of contributor out-of-state PAC (ID# Simmons Bank 6 Contributor address; City; State; Zip Code	:)	7 Amount of Contribution (\$) \$5.0
		Pine Bluff, AR 71601		
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)

PLE	DGED CONTRIBUTIO	NS			\$	SCHEDULE B
Т	he Instruction Guide explains	1	1 Total pages Schedule B: Sch: 1/1 Rpt: 5/12			
2 FILER N		3	Filer ID (Ethics Comm	ission Filers)		
	oublican Club of Bee County PAC	1	00018747			
4 TOTAL			\$	0.00		
5 Date	6 Full name of pledgor	out-of-state PAC (ID#:)	8		ind description f applicable)
	7 Pledgor Address; Cit	y; State; Zip Code				
				[Check if travel outside of Tex	as. Complete Schedule T.
10 Principal	occupation / Job title (See Instructions))	11 Employer (See Instr	ructi	ons)	

L	LOANS					SCHEDULI	Ε
1	The Instructio	iges Schedule E: 1 Rpt: 6/12					
	FILER NAME The Republican	Club of Bee County PAC			3 Filer ID 000187	(Ethics Commission Fi	lers)
4 1	ΓΟΤΑL OF UN	IITEMIZED LOANS			•	\$	0.00
5 C	Date of loan	7 Name of lender	out-of-state PA	C (ID#:)	9 Loan Amount (\$)	
fi	s lender a inancial nstitution?	8 Lender address; Ci	ity; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12 F	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instruction	s)		
14 [Description of Coll None	ateral		15 Check if personal funds w	ere deposited	d into political account (See Instructions)	
	GUARANTOR NFORMATION	17 Name of guarantor				19 Amount Guaranteed	d (\$)
	not applicable	18 Guarantor address; Ci	ity; State;	Zip Code			
20 F	Principal occupation	on		21 Employer (See Instruction	s)		

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District
Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/4 Rpt: 7/12	The Republican Club of Bee County PAC 00018747
4 Date	5 Payee name
06/14/2024	Adamez, Amanda (Miss)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$79.00	1703 Emily Dr
Expenditure from corporate funds	Beeville, TX 78102
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Attend State Convention
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/14/2024	Day, Cristi
Amount (\$)	Payee address; City; State; Zip Code
\$79.00	624 Main
4.0.00	
Expenditure from corporate funds	Normanna, TX 78142
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Convention Registration
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Data	
Date	Payee name
06/14/2024	Dial, Melissa
Amount (\$)	Payee address; City; State; Zip Code
\$79.00	PO Box 1072
Expenditure from corporate funds	Orange Grove, TX 78372
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Convention Registration
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	o

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/4 Rpt: 8/12	The Republican Club of Bee County PAC 00018747
4 Date	5 Payee name
06/12/2024	Diaz, Bernie (Mr.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,266.53	1414 Pecan St
Expenditure from corporate funds	McAllen, TX 78501
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense political signs
	ponticui sigris
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
06/14/2024	Fruend, Shannon
Amount (\$)	Payee address; City; State; Zip Code
\$79.00	160 Red Bird Lane
Expenditure from corporate funds	Beeville, TX 78102
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Convention registration
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
06/12/2024	Johnson, Patty (Ms.)
Amount (\$)	Payee address; City; State; Zip Code
\$79.00	2675 Airport Rd
Ψ10.00	2010 / III politika
Expenditure from	Popuille TV 79102
corporate funds	Beeville, TX 78102
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Attend State Convention
	, atoms state sometimes.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 3/4 Rpt: 9/12	The Republican Club of Bee County PAC 00018747
4 Date	5 Payee name
06/14/2024	Nguyn, Kim
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$79.00	732 Isom Rd
Expenditure from	Suite C.
corporate funds	San Antonio, TX 78216
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	State Conventiion Registration
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/14/2024	Oliver, Craig
Amount (\$)	Payee address; City; State; Zip Code
\$79.00	411 E Houston St
Expenditure from	
corporate funds	Beeville, TX 78102
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	convention Registration
	3333
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/14/2024	Prowse, Leland
Amount (\$)	Payee address; City; State; Zip Code
\$79.00	2192 hwy 59E
Expenditure from corporate funds	beeville, TX 78102
PURPOSE	1
OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	State Convention Regisration
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	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

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	- I Coi	mmittee	Gift/Awards/Memor Legal Services The Instruction	ials Expense Guide explains		ense ges/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)
_	Total pages Cabadula F1:	_						12	Filor ID	(Ethics Commission Filers)
ľ	Total pages Schedule F1:	_						3	Filer ID	(Ethics Commission Filers)
	Sch: 4/4 Rpt: 10/12		The Republi	ican Club of E	Bee County Pa	AC			00018747	
4	Date	5	Payee name							
	06/14/2024		fruend, Chris	S						
<u>۔</u>	Amount (\$)	7	Payee addres	ss; City;	State:	Zip Cod	Δ			
ľ		•			State,	_ Zip C00	C			
	\$79.00		160 Red Bir	u Riuge						
I_	T Expenditure from									
ᆫ	corporate funds		Beeville, TX	78102						
8	PURPOSE	(a)	Category (64	a Catagoriaa liatad	at the top of this sch	adula)	b) Description			
	OF	(-,	Event Exper		at the top of this sch	edule) \		l outsi	de of Texas. Com	plete Schedule T.
l	EXPENDITURE		Event Exper	130			Check if Austin	n, TX,	officeholder living	j expense
l							Convention I	Reg	istration	
9	Complete ONLY if direct		Candidata/Offic	ceholder name		Office soug	ht		Office he	74
ľ	expenditure to benefit C/O	Η,	zanuluale/Onic	cendider name		Jilice Soug	III		Office fit	eiu .
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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule I:	2 FILER NAME 3 Filer ID (Ethics Commission Filers	3)
Sch: 1/2 Rpt:	The Republican Club of Bee County PAC 00018747	,
4 Date	5 Payee name	
05/23/2024	Bee Family Fun Center	
6 Amount (\$)	7 Payee Address; City; State; Zip	
500.00	3900 N St. Mary's	
Expenditure from		
corporate funds	Beeville, TX 78102	·
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required	.)
OF EXPENDITURE	Event Expense donation	
Date	Payee name	
06/10/2024	Dollar General	
Amount (\$)	Payee Address; City; State; Zip	
8.61	1103 N Washington	
Expenditure from		
corporate funds	Beeville, TX 78102	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required	.)
EXPENDITURE	Food/Beverage Expense Meeting ex]pense	
Date	Payee name	
05/24/2024	Pizza Hut	
Amount (\$)	Payee Address; City; State; Zip	
122.24	2400 N. St. Mary's	
Expenditure from corporate funds	Beeville, TX 78102	
<u> </u>		`
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required refreshments monthly meeting	.)
EXPENDITURE	Tellesiments monthly meeting	
Date	Payee name	
06/11/2024	Pizza Hut	
Amount (\$)	Payee Address; City; State; Zip	
122.24	2400 N. St. Mary's	
Expenditure from		
corporate funds	Beeville, TX 78102	
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required	.)
OF EXPENDITURE	Food/Beverage Expense meeting	
EXI ENDITORE		

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

	The Instruction Guide explains how to complete this form.
Total pages Schedule I: Sch: 2/2 Rpt:	2 FILER NAME The Republican Club of Bee County PAC 3 Filer ID (Ethics Commission Filers) 00018747
4 Date 06/05/2024	5 Payee name Simmon's Bank
6 Amount (\$) 5.00 Expenditure from corporate funds	7 Payee Address; City; State; Zip PO Box 7009 Pine Bluff , AR 71611
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required.) bank Service Charge
Date 06/05/2024	Payee name Simmon's Bank
Amount (\$) 5.00 Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 7009 Pine Bluff , AR 71611
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description bank fee