

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) 00053163	2 Total pages filed: 48
3 COMMITTEE NAME Grimes County Republican Party (CEC)		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/15/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7506 County Road 204 Plantersville, TX 77363	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Mrs. Sherry L.	
		NICKNAME LAST SUFFIX Fauth	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7506 County Road 204 Plantersville, TX 77363	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7506 County Road 204 Plantersville, TX 77363	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (713) 817-1653	
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 02/25/2024 THROUGH 06/30/2024	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 03/03/2026 <input 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 Grimes County Republican Party (CEC)	13 Filer ID (Ethics Commission Filers) 00053163
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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
		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)	\$ 54,188.09
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 38,063.97
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 167,633.36
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.

Mrs. Sherry L. Fauth

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
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17 COMMITTEE NAME Grimes County Republican Party (CEC)		18 Filer ID (Ethics Commission Filers) 00053163
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 54,188.09
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 38,063.97
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
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: 1/26 Rpt: 4/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agan, Dan (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Anderson, TX 77380	
8 Principal occupation / Job title (See Instructions) Exec. Vice President		9 Employer (See Instructions) Reynolds & Reynolds
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alford, Laura	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Iola, TX 77861	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) All Solar Texas	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code College Station, TX 77845	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Ronald R (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77070	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avarance, Will	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Iola, TX 77861	
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: 2/26 Rpt: 5/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barcak, Ethan <hr/> 6 Contributor address; City; State; Zip Code Navasota, TX 77868	7 Amount of Contribution (\$) \$1,140.00
8 Principal occupation / Job title (See Instructions) communications		9 Employer (See Instructions) Brooks Baylee
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barcak, Megan <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$1,250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self employed
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bender, Andria (Ms.) <hr/> Contributor address; City; State; Zip Code Navasota, TX 77873	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) District Attorney		Employer (See Instructions) Grimes County
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Judith (Mrs.) <hr/> Contributor address; City; State; Zip Code Shiro, TX 77876-0099	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benton, Marc <hr/> Contributor address; City; State; Zip Code Anderson, TX 77830	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) I T		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/26 Rpt: 6/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benton, Marc	7 Amount of Contribution (\$) \$1,950.00
6 Contributor address; City; State; Zip Code Anderson, TX 77830		
8 Principal occupation / Job title (See Instructions) I T		9 Employer (See Instructions) self
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bettes, Marilyn (Mrs.)	Amount of Contribution (\$) \$550.00
Contributor address; City; State; Zip Code Plantersville, TX 77363		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bettes, Marilyn (Mrs.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Plantersville, TX 77363		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bius, Ben	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Huntsville, TX 77340		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) self
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bius, Ben	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Huntsville, TX 77340		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/26 Rpt: 7/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn, Mary	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code Waller, TX 77484	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn, Mary	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Waller, TX 77484	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blevins , John	Amount of Contribution (\$) \$800.00
	Contributor address; City; State; Zip Code College Station, TX 77845	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Botkin , John	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Anderson, TX 77830	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brand, Max (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Navasota, TX 77868	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Max Brand Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/26 Rpt: 8/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Joseph <hr/> 6 Contributor address; City; State; Zip Code Montgomery, TX 77316	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Joseph <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) commercial sales		Employer (See Instructions) Newquest
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cahill, Diane L. (Mrs.) <hr/> Contributor address; City; State; Zip Code Iola, TX 77861	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cahill, Diane L. (Mrs.) <hr/> Contributor address; City; State; Zip Code Iola, TX 77861	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callahan, Megan <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/26 Rpt: 9/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cameron, D.S. (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77070	
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney , Gary (Judge)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Katy, TX 77493	
Principal occupation / Job title (See Instructions) District Judge		Employer (See Instructions) State of Texas
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney , Gary (Judge)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Katy, TX 77493	
Principal occupation / Job title (See Instructions) District Judge		Employer (See Instructions) State of Texas
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney , Gary (Judge)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Katy, TX 77493	
Principal occupation / Job title (See Instructions) District Judge		Employer (See Instructions) State of Texas
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Billy	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Navasota, TX 77868	
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) Billy Cox Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/26 Rpt: 10/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davenport, Mike <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Trademark Productions
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Richard <hr/> Contributor address; City; State; Zip Code iola, TX 77861	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drout, Lisa <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77354	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberhard, David <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eickenhorst , Larry <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$100.00
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: 8/26 Rpt: 11/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Elizabeth F <hr/> 6 Contributor address; City; State; Zip Code Bedias, TX 77831	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Physicians Assistant		9 Employer (See Instructions) BIS Community Clinic
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estes, Erik <hr/> Contributor address; City; State; Zip Code Anderson, TX 77830	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Peter <hr/> Contributor address; City; State; Zip Code Iola, TX 77861	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fauth, Joseph (Judge) <hr/> Contributor address; City; State; Zip Code Plantersville, TX 77363	Amount of Contribution (\$) \$151.00
Principal occupation / Job title (See Instructions) County Judge		Employer (See Instructions) Grimes County
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fauth, Joseph (Judge) <hr/> Contributor address; City; State; Zip Code Plantersville, TX 77363	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) County Judge		Employer (See Instructions) Grimes County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/26 Rpt: 12/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finney, Nancy <hr/> 6 Contributor address; City; State; Zip Code iola, TX 77861	7 Amount of Contribution (\$) \$195.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) Astin Exec Svc
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finney, Nancy <hr/> Contributor address; City; State; Zip Code iola, TX 77861	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Astin Exec Svc
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Andrea <hr/> Contributor address; City; State; Zip Code Burton, TX 77835	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Director Communications		Employer (See Instructions) Texas Senate
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Andrea <hr/> Contributor address; City; State; Zip Code Burton, TX 77835	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Director Communications		Employer (See Instructions) Texas Senate
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Darrell <hr/> Contributor address; City; State; Zip Code iola, TX 77861	Amount of Contribution (\$) \$125.00
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: 10/26 Rpt: 13/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Rodney <hr/> 6 Contributor address; City; State; Zip Code Anderson, TX 77830	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Maintenance Director		9 Employer (See Instructions) Grimes County
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) French, Richard <hr/> Contributor address; City; State; Zip Code Iola, TX 77861	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fultz, Joe King (Mr.) <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Turner, Pierce & Fultz
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garnett, Carol <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) rancher		Employer (See Instructions) self
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geffert, Michael (Mr.) <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$150.09
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/26 Rpt: 14/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Anthony (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Navasota, TX 77868	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) FuelTrax
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Michelle	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code The Woodlands, TX 77382	
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) Fuel Trax
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Happ, Denise	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Iola, TX 77861	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Happ, Denise	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Iola, TX 77861	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Happ, Denise	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Iola, TX 77861	
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: 12/26 Rpt: 15/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hargrave, Cindy <hr/> 6 Contributor address; City; State; Zip Code Navasota, TX 77868	7 Amount of Contribution (\$) \$170.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Brad <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77339	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Financial Planner		Employer (See Instructions) self employed
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatfield, Larry <hr/> Contributor address; City; State; Zip Code Richards, TX 77873	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Security and Investigator		Employer (See Instructions) Eagle Investigation and Protection Services
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hector, Dale <hr/> Contributor address; City; State; Zip Code Iola, TX 77861	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hector, Dale <hr/> Contributor address; City; State; Zip Code Iola, TX 77861	Amount of Contribution (\$) \$45.00
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: 13/26 Rpt: 16/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Clifford (Mr.)	7 Amount of Contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code Plantersville, TX 77363		
8 Principal occupation / Job title (See Instructions) General Contractor		9 Employer (See Instructions) Self
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobs, Donnie M. (Mr.)	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Plantersville, TX 77363		
Principal occupation / Job title (See Instructions) Hay Farmer		Employer (See Instructions) Self
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobson, Gerald	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Iola, TX 77861		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Wallace	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Franklin, TX 77856		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Brice (Mr.)	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Anderson, TX 77830		
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: 14/26 Rpt: 17/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaciuba, Gail (Mrs.)	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code PLANTERSVILLE, TX 77363	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimich , Carolyn	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Anderson, TX 77830	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kolkhorst , Lois (Sen.)	Amount of Contribution (\$) \$3,000.00
	Contributor address; City; State; Zip Code Brenham, TX 77834	
Principal occupation / Job title (See Instructions) State Senator		Employer (See Instructions) State of Texas
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovar, Wendell	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Plantersville, TX 77363	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucius, Sheryl (Mrs.)	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Waller, TX 77484	
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: 15/26 Rpt: 18/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucius, Sheryl (Mrs.)	7 Amount of Contribution (\$) \$75.00
6 Contributor address; City; State; Zip Code Waller, TX 77484		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallett, Chad (Commissioner)	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Iola, TX 77861		
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Grimes County
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Zingara (Mr.)	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Madisonville, TX 77864		
Principal occupation / Job title (See Instructions) Ranching		Employer (See Instructions) Self Employed
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Billy (Mr.)	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Iola, TX 77861		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Prefab Companies
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCaul, Michael (Rep.)	Amount of Contribution (\$) \$1,250.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) US Representative		Employer (See Instructions) US

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/26 Rpt: 19/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDuffie, Ann (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Iola, TX 77861	
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Rancher/clock rep.
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNew, Gary	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Iola, TX 77863	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNew, Gary	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Iola, TX 77863	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menard, Rena	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77033	
Principal occupation / Job title (See Instructions) Campaign Advisor		Employer (See Instructions) Courtney Armstead
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Josephine (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Bryan, TX 77808	
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: 17/26 Rpt: 20/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Jr., Wm A (Mr.)	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code Navasota, TX 77868	
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Miller Insurance
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, Alan	Amount of Contribution (\$) \$455.00
	Contributor address; City; State; Zip Code Montgomery, TX 77356	
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions) Path Environmental
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montford, Bobbi	Amount of Contribution (\$) \$85.00
	Contributor address; City; State; Zip Code Navasota, TX 77868	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montford, Bobbi (Mrs.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Navasota, TX 77868	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moorman, David	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Huntsville, TX 77320	
Principal occupation / Job title (See Instructions) District Judge		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/26 Rpt: 21/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moorman, David <hr/> 6 Contributor address; City; State; Zip Code Huntsville, TX 77320	7 Amount of Contribution (\$) \$175.00
8 Principal occupation / Job title (See Instructions) District Judge		9 Employer (See Instructions) State of Texas
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Sullivan, Nina <hr/> Contributor address; City; State; Zip Code Wellborn, TX 77881	Amount of Contribution (\$) \$840.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortwerth, Trudy <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) P Edward Construction <hr/> Contributor address; City; State; Zip Code Salado, TX 76571	Amount of Contribution (\$) \$575.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick, David (Mr.) <hr/> Contributor address; City; State; Zip Code Iola, TX 77861	Amount of Contribution (\$) \$42.00
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: 19/26 Rpt: 22/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick, Susan (Mrs.)	7 Amount of Contribution (\$) \$210.00
	6 Contributor address; City; State; Zip Code Iola, TX 77861	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearce, Jo	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Iola, TX 77861	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pointer, Alec	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Iola, TX 77861	
Principal occupation / Job title (See Instructions) business analyst		Employer (See Instructions) TAMU
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pointer, Alec	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Iola, TX 77861	
Principal occupation / Job title (See Instructions) business analyst		Employer (See Instructions) TAMU
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pointer, Alec	Amount of Contribution (\$) \$85.00
	Contributor address; City; State; Zip Code Iola, TX 77861	
Principal occupation / Job title (See Instructions) business analyst		Employer (See Instructions) TAMU

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/26 Rpt: 23/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pressley , Kathryn <hr/> 6 Contributor address; City; State; Zip Code Bedias, TX 77831	7 Amount of Contribution (\$) \$80.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Robert M. (Mr.) <hr/> Contributor address; City; State; Zip Code Iola, TX 77861	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Chad (Mr.) <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$170.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Navasota LP Gas
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Wesley <hr/> Contributor address; City; State; Zip Code unknown, TX 77868	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheve, JaniceStephen <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) retired attorney		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/26 Rpt: 24/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shackleford, Timothy <hr/> 6 Contributor address; City; State; Zip Code Iola, TX 77861	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shoalmire, Alan D <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shoalmire, Alan D <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skipworth, Kevin <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slocum , John Harvey <hr/> Contributor address; City; State; Zip Code Millican, TX 77866	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Restauranteur		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/26 Rpt: 25/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kim <hr/> 6 Contributor address; City; State; Zip Code Bedias, TX 77831	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sowell, Gail (Mrs.) <hr/> Contributor address; City; State; Zip Code Anderson, TX 77830	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Kenneth <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Kenneth <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Kenneth <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$190.00
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: 23/26 Rpt: 26/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stukey, Dianne <hr/> 6 Contributor address; City; State; Zip Code Iola, TX 77861	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanous, Mike <hr/> Contributor address; City; State; Zip Code Iola, TX 77861	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tardiff, Cheryl N. (Ms.) <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$450.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tardiff, Cheryl N. (Ms.) <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templeton, Bob <hr/> Contributor address; City; State; Zip Code Iola, TX 77861	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) HCA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/26 Rpt: 27/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templeton, Bob <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77861	7 Amount of Contribution (\$) \$380.00
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) HCA
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tew , Justin <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) lineman		Employer (See Instructions) N Houston Pole Line
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tew , Justin <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of Contribution (\$) \$450.00
Principal occupation / Job title (See Instructions) lineman		Employer (See Instructions) N Houston Pole Line
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tullos, David (Commissioner) <hr/> Contributor address; City; State; Zip Code Plantersville, TX 77363	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Commissioner		Employer (See Instructions) Grimes County
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vacante, Jonathan <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$1,700.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) Frank's Towing and Repair

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/26 Rpt: 28/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ver Schuur, Ashley	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Navasota, TX 77868		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) self
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Mary Ann (Mrs.)	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Navasota, TX 77868		
Principal occupation / Job title (See Instructions) Tax Assessor/Collector		Employer (See Instructions) Grimes County
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westmoreland, Dianna	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Navasota, TX 77868		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westmoreland, Dianna	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Navasota, TX 77868		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wharton, Jo Lynne	Amount of Contribution (\$) \$160.00
Contributor address; City; State; Zip Code Huntsville, TX 77342		
Principal occupation / Job title (See Instructions) business consultant		Employer (See Instructions) Wharton Insurance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/26 Rpt: 29/48
2 FILER NAME Grimes County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wharton, Jo Lynne <hr/> 6 Contributor address; City; State; Zip Code Huntsville, TX 77342	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) business consultant		9 Employer (See Instructions) Wharton Insurance
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wignall, Chett <hr/> Contributor address; City; State; Zip Code Tomball, TX 77377	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William, Mark (Mr.) <hr/> Contributor address; City; State; Zip Code Navasota, TX 77868	Amount of Contribution (\$) \$1,250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Bud (Mr.) <hr/> Contributor address; City; State; Zip Code Iola, TX 77861	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 30/48

2 FILER NAME
Grimes County Republican Party (CEC)

3 Filer ID (Ethics Commission Filers)
00053163

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

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: 1/18 Rpt: 31/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
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4 Date 06/03/2024	5 Payee name Bennett, Judith Francklow (Mrs.)
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6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code P, O, Box 99 Shiro, TX 77876
----------------------------------	--

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 State Convention
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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 02/26/2024	Payee name Berger, Gerald (Mr.)
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Amount (\$) \$150.00	Payee address; City; State; Zip Code 33303 Buckshot Ln. Magnolia, TX 77354
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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 band RD
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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 02/26/2024	Payee name Bettes, Marilyn (Ms.)
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Amount (\$) \$97.43	Payee address; City; State; Zip Code 17016 FM 1774 Plantersville, TX 77363
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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 balloons for RD
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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: 2/18 Rpt: 32/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
4 Date 06/03/2024	5 Payee name Bettes, Marilyn (Ms.)	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 17016 FM 1774 Plantersville, TX 77363	
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 State Convention
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name Cahill, Diane	
Amount (\$) \$326.85	Payee address; City; State; Zip Code 10206 St John Dr Iola, TX 77861	
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 Reagan Dinner Decorations
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name Cahill, Diane	
Amount (\$) \$420.37	Payee address; City; State; Zip Code 10206 St John Dr Iola, TX 77861	
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 RD Decorations
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: 3/18 Rpt: 33/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Payee name Cahill, Diane	
6 Amount (\$) \$299.77	7 Payee address; City; State; Zip Code 10206 St John Dr Iola, TX 77861	
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 RD decorations
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/22/2024	Payee name Cahill, Diane	
Amount (\$) \$156.96	Payee address; City; State; Zip Code 10206 St John Dr Iola, TX 77861	
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 RD decorations
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/03/2024	Payee name Cahill, Diane	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 10206 St John Dr Iola, TX 77861	
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 State Convention reimbursement
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: 4/18 Rpt: 34/48	2	FILER NAME Grimes County Republican Party (CEC)	3	Filer ID (Ethics Commission Filers) 00053163
4	Date 06/05/2024	5	Payee name Clements, Connie (Ms.)		
6	Amount (\$) \$500.00	7	Payee address; City; State; Zip Code 300 Hillside Street Navasota, TX 77868		
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 State Convention		
9		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 02/26/2024		Payee name Collums, Stephanie		
	Amount (\$) \$62.79		Payee address; City; State; Zip Code 5418 Dogwood Place Navasota, TX 77868		
	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 breakfast RD setup		
		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 02/26/2024		Payee name Colon and Company		
	Amount (\$) \$3,250.00		Payee address; City; State; Zip Code 3311 Richmond Ave Ste 319 Houston, TX 77098		
	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 GOTV mailer		
		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: 5/18 Rpt: 35/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Payee name Events to Remember Wedding & Party Rental	
6 Amount (\$) \$1,618.81	7 Payee address; City; State; Zip Code 1206 Durden Navasota, TX 77868	
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 linens for RD
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/03/2024	Payee name Fauth, Joe (Judge)	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 7506 County Road 204 Plantersville, TX 77363	
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 State Convention
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name Fauth, Sherry (Mrs.)	
Amount (\$) \$260.65	Payee address; City; State; Zip Code 7506 CR 204 Plantersville, TX 77363	
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 setup breakfast and lunch RD
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: 6/18 Rpt: 36/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
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4 Date 06/03/2024	5 Payee name Fauth, Sherry (Mrs.)
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6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 7506 CR 204 Plantersville, TX 77363
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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 State Convention
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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 06/03/2024	Payee name Fauth, Sherry (Mrs.)
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Amount (\$) \$600.00	Payee address; City; State; Zip Code 7506 CR 204 Plantersville, TX 77363
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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 TEC fines
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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 06/05/2024	Payee name Gardiner, Lyn
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Amount (\$) \$500.00	Payee address; City; State; Zip Code 105 Garnet Navasota, TX 77868
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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 State Convention
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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: 7/18 Rpt: 37/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Payee name Grimes / Navasota Chamber of Commerce	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 117 S. LaSalle Navasota, TX 77868	
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 sponsor Coffee with the Chamber
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name Grimes County Expo Center	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code P. O. Box 270 Anderson, TX 77830	
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 hall rental RD
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/05/2024	Payee name Hector, Dale	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 12124 CR 175 Iola, TX 77861	
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 State Convention
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: 8/18 Rpt: 38/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
4 Date 06/05/2024	5 Payee name Hector, Tina	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 12124 CR 175 Iola, TX 77861	
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 State Convention
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/05/2024	Payee name Honick, Deloris	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 13512 Satcher Lane Bedias, TX 77831	
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 State Convention
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name Jacobs , Kathy	
Amount (\$) \$887.85	Payee address; City; State; Zip Code 8298 CR 204 Plantersville, TX 77363	
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 bar supplies RD
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: 9/18 Rpt: 39/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
4 Date 06/05/2024	5 Payee name Kimich, Carolyn	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 3379 CR 180 Anderson, TX 77830	
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 State Convention
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name Leona General Store Catering	
Amount (\$) \$10,169.18	Payee address; City; State; Zip Code 136 TX 75 Leona, TX 75850	
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 for RD
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/03/2024	Payee name Lucius, Sheryl	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 17307 Lively Rd Waller, TX 77484	
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 State Convention reimbursement
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: 10/18 Rpt: 40/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
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4 Date 06/05/2024	5 Payee name Megan, Barcak
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6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 903 Water St Navasota, TX 77868
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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 State Convention reimbursement
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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 06/03/2024	Payee name Montford, Bobbi (Mrs.)
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Amount (\$) \$500.00	Payee address; City; State; Zip Code 13725 Theresa Rd Navasota, TX 77868
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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 State Convention Reimbursement
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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 02/25/2024	Payee name Navasota Examiner
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 115 Railroad Street Navasota, TX 77868
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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 Republican Party ads
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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: 11/18 Rpt: 41/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
4 Date 03/22/2024	5 Payee name Navasota ISD Education Foundation	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 705 E. Washington Navasota, TX 77868	
8 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 table sponsorship
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/05/2024	Payee name Padgett, Stephanie	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 20667 FM 39 Iola, TX 77861	
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 State Convention reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/05/2024	Payee name Patrick, David (Mrs.)	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 9779 Mountbatten Trail Iola, TX 77861	
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 State Convention
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: 12/18 Rpt: 42/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
4 Date 02/26/2024	5 Payee name Patrick, Susan (Mrs.)	
6 Amount (\$) \$283.29	7 Payee address; City; State; Zip Code 9779 Mountbatten Trail Iola, TX 77861	
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 rd expenses
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name Patrick, Susan (Mrs.)	
Amount (\$) \$134.39	Payee address; City; State; Zip Code 9779 Mountbatten Trail Iola, TX 77861	
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 Election training
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/26/2024	Payee name Patrick, Susan (Mrs.)	
Amount (\$) \$304.73	Payee address; City; State; Zip Code 9779 Mountbatten Trail Iola, TX 77861	
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 office equipment supplies
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/18 Rpt: 43/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
4 Date 05/06/2024	5 Payee name Patrick, Susan (Mrs.)	
6 Amount (\$) \$79.02	7 Payee address; City; State; Zip Code 9779 Mountbatten Trail Iola, TX 77861	
8 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 Trump signs
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/03/2024	Payee name Patrick, Susan (Mrs.)	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 9779 Mountbatten Trail Iola, TX 77861	
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 State Convention
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name Player, Michael	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 33303 Buckshot Lane Magnolia, TX 77354	
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 band RD
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: 14/18 Rpt: 44/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
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4 Date 02/26/2024	5 Payee name Pointer, Alec
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6 Amount (\$) \$119.87	7 Payee address; City; State; Zip Code 8795 CR 121 Iola, TX 77861
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8 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 lunch for Iola YR
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/26/2024	Payee name Pointer, Alec
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Amount (\$) \$535.99	Payee address; City; State; Zip Code 8795 CR 121 Iola, TX 77861
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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 Dinner and gift cards for volunteers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/01/2024	Payee name Pointer, Alec
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Amount (\$) \$153.68	Payee address; City; State; Zip Code 8795 CR 121 Iola, TX 77861
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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 lunch for Iola Y R
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Complete ONLY 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: 15/18 Rpt: 45/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
4 Date 06/05/2024	5 Payee name Pointer, Alec	
6 Amount (\$) \$263.00	7 Payee address; City; State; Zip Code 8795 CR 121 Iola, TX 77861	
8 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 lunches for Iola YR
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/03/2024	Payee name Pointer, Alec	
Amount (\$) \$125.00	Payee address; City; State; Zip Code 8795 CR 121 Iola, TX 77861	
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 State Convention
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name Rent Check Property Management Inc	
Amount (\$) \$900.00	Payee address; City; State; Zip Code 8344 Spring Cypress Rd Suite B Spring, TX 77379	
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 HQ rental
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: 16/18 Rpt: 46/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
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4 Date 02/26/2024	5 Payee name Rent Check Property Management Inc
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6 Amount (\$) \$900.00	7 Payee address; City; State; Zip Code 8344 Spring Cypress Rd Suite B Spring, TX 77379
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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 March rent
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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 02/26/2024	Payee name Rent Check Property Management Inc
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Amount (\$) \$900.00	Payee address; City; State; Zip Code 8344 Spring Cypress Rd Suite B Spring, TX 77379
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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 rent
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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 04/01/2024	Payee name Rent Check Property Management Inc
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Amount (\$) \$900.00	Payee address; City; State; Zip Code 8344 Spring Cypress Rd Suite B Spring, TX 77379
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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 rent
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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: 17/18 Rpt: 47/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
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4 Date 05/06/2024	5 Payee name Rent Check Property Management Inc
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6 Amount (\$) \$900.00	7 Payee address; City; State; Zip Code 8344 Spring Cypress Rd Suite B Spring, TX 77379
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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 rent
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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 06/05/2024	Payee name Shoalmire, Jennifer
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Amount (\$) \$375.00	Payee address; City; State; Zip Code 517 Church St Navasota, TX 77868
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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 State Convention
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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 06/05/2024	Payee name Smith, Lisa (Ms.)
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Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 601 Anderson, TX 77830
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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 State Convention
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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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/18 Rpt: 48/48	2 FILER NAME Grimes County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053163
4 Date 03/01/2024	5 Payee name anedot Inc	
6 Amount (\$) \$789.34	7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
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 fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held