FORM PTY-CORP POLITICAL PARTY REPORT REGARDING FUNDS FROM CORPORATIONS AND LABOR ORGANIZATIONS **COVER SHEET PG 1** Filer ID 2 Total pages filed The Form PTY-CORP Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00024061 3 POLITICAL PARTY Wise County Republican Party (P) **OFFICE USE ONLY** NAME Date Received STATE OR COUNTY **ELECTRONICALLY FILED** State **PARTY** 07/18/2024 X County: Wise POLITICAL PARTY Democrat **TYPE** Republican Libertarian Other: Date Hand-delivered or Date Postmarked (Party name) Receipt # Amount POLITICAL PARTY ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE MAILING ADDRESS PO Box 1521 Date Processed Change of Address Decatur, TX 76234 Date Imaged POLITICAL PARTY TITLE **FIRST NICKNAME** LAST **SUFFIX** MΙ **CHAIR** Richard Lifto STATE; ZIP CODE **CHAIR MAILING** ADDRESS / PO BOX; APT / SUITE #; CITY; **ADDRESS** Change of Address TX CHAIR STREET STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **ADDRESS** 1505 Rodden dr (Residence or Business) Decatur, TX 76234 AREA CODE PHONE NUMBER **10** CHAIR PHONE **EXTENSION** (817) 807-1811 11 REPORT TYPE January 15 8th day before primary election X July 15 50th day before general election 12 PERIOD COVERED Month Day Year Month Day Year **THROUGH** 01/01/2024 06/30/2024

FORM PTY-CORP **POLITICAL PARTY REPORT: TOTALS AND AFFIDAVIT COVER SHEET PG 2** 13 POLITICAL PARTY NAME 14 Filer ID (Ethics Commission Filers) 00024061 Wise County Republican Party (P) 15 TOTALS 1. TOTAL CONTRIBUTIONS FROM CORPORATE OR LABOR **ORGANIZATIONS** \$ 0.00 (OTHER THAN LOANS OR GUARANTEES OF LOANS) 2. TOTAL EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS \$ 4,262.58 3. TOTAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD 500.00 \$

A political party must file a report on FORM PTY-CORP for any reporting period during which the party accepts corporate or labor organization contributions, maintains corporate or labor organization contributions, or makes expenditures from corporate or labor organization contributions.

FFIDAVIT	
	I swear, or affirm, under penalty of perjury, that the accompanying reportrue and correct and includes all information required to be reported by under Title 15, Election Code.
	Mr. Richard Lifto Signature of Political Party Chair
AFFIX NOTARY STAMP / SEAL	
Sworn to and subscribed before me, by the said, of, to certify which, v	, this the da vitness my hand and seal of office.

FORM PTY-CORP **SUBTOTALS - PTYCORP COVER SHEET PG 3** 3 of 4 17 POLITICAL PARTY NAME 18 Filer ID (Ethics Commission Filers) Wise County Republican Party (P) 00024061 19 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR \$ **ORGANIZATION** SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR 2. \$ LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$ 3. SCHEDULE E: LOANS \$ SCHEDULE F1: EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION 5. X 4,262.58 \$ **CONTRIBUTIONS** SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$

EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages The Instruction Guide explains how to complete	
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 1/1 Rpt: 4/4	Wise County Republican Party (P)	00024061
4	Date	Payee name	
	03/18/2024	Decatur Conference Center	
6	Amount (\$) \$4,262.58	Payee address; City; State; Zip Code 2010 US 380	
Χ	Expenditure from corporate funds	Decatur, TX 76234	
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
			Wise County Convention
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held