COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

FORM CEC COVER SHEET PG 1

Th	e CEC Instruction G	uide explains how to complete this form.	1 Filer ID (EI 00037828	thics Commission Filers)	2 Total pages filed: 26		
3	COMMITTEE NAME				OFFICE US	SE ONLY	
	Republican Party of	of Fort Bend County (CEC)			Date Received		
					ELECTRONICAL 10/07/2024	LY FILED	
4	COMMITTEE ADDRESS		TY; STATE	E; ZIP CODE			
	ADDITESS	P.O. Box 461			Date Hand-delivered or D	Date Postmarked	
	Change of Address						
		Sugar Land, TX 77487-0461			Receipt #	Amount	
					Date Processed		
					Date Imaged		
					Date imaged		
5	CAMPAIGN	MS / MRS / MR FIRST			MI		
	TREASURER NAME	Mr. Doug					
		NICKNAME LAST			SUFFIX		
		White					
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE)	APT	/ SUITE #; CITY;	STAT	E; ZIP CODE	
	TREASURER STREET	5423 Ashley Way Court					
	ADDRESS						
	(Residence or Business)	Sugar Land, TX 77479					
7	CAMPAIGN	STREET OR PO BOX;	AP	PT / SUITE #; CITY	(; STA	TE; ZIP CODE	
	TREASURER MAILING	PO Box 461					
	ADDRESS						
	Change of Address	Sugar Land, TX 77487					
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION				
	TREASURER	(713) 515-7540					
	PHONE						
9	REPORT	January 15	Oth day before elect	ion	Final Report		
	TYPE		th day before election	n L	10th day after camp	naign treasurer	
		July 15	-	L	termination	Saight (Casaron	
			Runoff				
10	PERIOD	Month Day Year		Month Day	Year		
	COVERED	07/01/2024	HROUGH	09/26/202	24		
11	ELECTION	ELECTION DATE	Drimon	ELECTION TYPE	Cthor		
		Month Day Year 11/05/2024	Primary	Runoff	Other		
		X	General	Special			
	GO TO PAGE 2						
	rme provided by Te			<u></u>	Vorsion		
г 0	ins provided by Te	xas Ethics Commission www.e	thics.state.tx.us	b	versio	n V4.1.0.48da51f7	

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME				13 File	r ID	(Ethics Commission Filers)
Republican Party of For	t Bend County (CEC)		000	37828	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Republican	·		
(Attach lists on plain paper to complete this report if necessary.)		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	PLEDGES, LOAN	S, OR GUARAN MADE ELECTF	CONTRIBUTIONS (OTHER T TEES OF LOANS, OR RONICALLY) higher itemization threshold	THAN	\$	3,113.00
	2. TOTAL POLITIC (OTHER THAN P		SUTIONS IS, OR GUARANTEES OF LC	DANS)	\$	94,189.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICAL	EXPENDITURES		\$	0.00
	4. TOTAL POLITIC	CAL EXPENDI	TURES		\$	43,827.76
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT		ONS MAINTAINED AS OF TH	IE LAST DAY	\$	50,361.24
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPA LAST DAY OF TH		ALL OUTSTANDING LOANS PERIOD	AS OF THE	\$	0.00
16 AFFIDAVIT	•					
			I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	s all information		
				Mr. Doug Whi	te	
			Signatu	ire of Campaign		er
AFFIX NOTARY	STAMP / SEAL ABOV	E				
Sworn to and subscribed	before me, by the said			, this the		day
			s my hand and seal of office.	,		~~,
Signature of officer ad	ministering oath	Printed name	of officer administering oath	Title	e of office	er administering oath
Forms provided by Texas E	thics Commission	WWW	.ethics.state.tx.us			Version V4.1.0.48da51f7

FORM CEC COVER SHEET PG 3

3 of 26	
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17 COMMITT Republica	EE NAME In Party of Fort Bend County (CEC)	18 Filer ID 00037828	(Ethics Commission Filers)
19 SCHEDUL NAME OF	SUBTOTAL AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 94,189.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE E: LOANS		\$
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 43,827.76
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$
10.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

SUBTOTALS - CEC

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 1/8 Rpt: 4/26	
2 FILER NAME				Filer ID (Ethics Commissio	on Filers)
	Party of Fort Bend County (CEC)			00037828	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	÷100.00
09/03/2024	Air Power Of Houston				\$100.00
	6 Contributor address; City; State; Zip Code				
	Richmond , TX 77469-6103				
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
09/03/2024	Albright , Linda				\$500.00
	Contributor address; City; State; Zip Code				
	Sugar Land , TX 77498-6358				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
Retired		Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
08/09/2024	Ali Sheikhani FB County Constable PCT 3 Camp	paign			\$4,000.00
	Contributor address; City; State; Zip Code				
	Houston, TX 77036				
Principal occu	<pre>ipation / Job title (See Instructions)</pre>	Employer (See Instructions	s)		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
07/31/2024	Andrew Johnson Campaign				\$5,000.00
	Contributor address; City; State; Zip Code				
	Kingwood , TX 77345				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
07/31/2024	Brad Hart Campaign				\$5,000.00
	Contributor address; City; State; Zip Code				
	Kingwood , TX 77339				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		

SCHEDULE A1

L				
The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 2/8 Rpt: 5/26	
2 FILER NAME			3 Filer ID (Ethics Commissio	on Filers)
	Party of Fort Bend County (CEC)		00037828	лтт но.с,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/20/2024	Brad Hart Campaign			\$10,000.00
	6 Contributor address; City; State; Zip Code			
	Kingwood , TX 77339			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/03/2024	Cantanla , Joseph			\$500.00
	Contributor address; City; State; Zip Code			
	Missouri City , TX 77459	<u> </u>	-	
-	ipation / Job title (See Instructions)	Employer (See Instructions))	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/31/2024	Chad Bridges For Judge			\$5,000.00
	Contributor address; City; State; Zip Code			
	Sugar Land TV 77470			
Bringinal occu	Sugar Land , TX 77479	Employer (See Instructions)		
ΗΠΟιραί Ουυυ	ipation / Job title (See Instructions))	
Data	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
Date 08/05/2024	Full name of contributor out-of-state PAC (ID#: Chad Bridges For Judge)	Amount of Contribution (\$)	\$5,000.00
00/05/2024				Φ3,000.00
	Contributor address; City; State; Zip Code			
	Sugar Land , TX 77479			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
-			, ,	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/03/2024	Davey, Helen			\$42.00
	Contributor address; City; State; Zip Code			
	Sugar Land , TX 77498-2663			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
Retired		Retired		
		I		

SCHEDULE A1

The Instruction Guide explains how to complete this form.	
	1 Total pages Schedule A1: Sch: 3/8 Rpt: 6/26
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Republican Party of Fort Bend County (CEC)	00037828
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/31/2024 Davidson, Donna	\$5,000.00
6 Contributor address; City; State; Zip Code	
Austin , TX 78711	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Attorney DGD Law Firm	IS)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/18/2024 Emmons , Fred	\$25.00
Contributor address; City; State; Zip Code	
Miccouri City TV 774E0 2621	
Missouri City , TX 77459-3621	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	is)
Retired	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/14/2024 Gremminger , Larry	\$1,000.00
Contributor address; City; State; Zip Code	
Richmond , TX 77406-1370	
Richmond , TX 77406-1370 Principal occupation / Job title (See Instructions) Employer (See Instructions)	ls)
	lis)
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Retired	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Retired Retired Date Full name of contributor 09/03/2024 Hauche , Diana	
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Retired Retired Date Full name of contributor 09/03/2024 Hauche , Diana	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Retired Retired Date Full name of contributor 09/03/2024 Hauche , Diana	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Retired Retired Date Full name of contributor out-of-state PAC (ID#:) 09/03/2024 Hauche , Diana Contributor address; City; State; Zip Code	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Retired Date Full name of contributor out-of-state PAC (ID#:) 09/03/2024 Hauche , Diana Contributor address; City; State; Zip Code Pearland , TX 77584-3443	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Date Full name of contributor out-of-state PAC (ID#:) 09/03/2024 Hauche , Diana Contributor address; City; State; Zip Code Pearland , TX 77584-3443 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Retired Full name of contributor out-of-state PAC (ID#:) 09/03/2024 Hauche , Diana	Amount of Contribution (\$) \$100.00 Is)
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Date Full name of contributor out-of-state PAC (ID#:) 09/03/2024 Hauche , Diana	Amount of Contribution (\$) \$100.00 Is) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Retired Full name of contributor out-of-state PAC (ID#:) 09/03/2024 Hauche , Diana	Amount of Contribution (\$) \$100.00 Is)
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Date Full name of contributor out-of-state PAC (ID#:) 09/03/2024 Hauche , Diana	Amount of Contribution (\$) \$100.00 Is) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Retired Full name of contributor out-of-state PAC (ID#:) 09/03/2024 Hauche , Diana	Amount of Contribution (\$) \$100.00 Is) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Retired Full name of contributor out-of-state PAC (ID#:) 09/03/2024 Hauche , Diana	Amount of Contribution (\$) \$100.00 Is) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Retired Full name of contributor out-of-state PAC (ID#:) 09/03/2024 Hauche , Diana	Amount of Contribution (\$) \$100.00 Is) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Date Full name of contributor out-of-state PAC (ID#:) 09/03/2024 Hauche , Diana	Amount of Contribution (\$) \$100.00 (\$) (\$) Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Retired Date Full name of contributor out-of-state PAC (ID#:) 09/03/2024 Hauche , Diana	Amount of Contribution (\$) \$100.00 (\$) (\$) Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Employer (See Instruction: Retired Date Full name of contributor out-of-state PAC (ID#:) 09/03/2024 Hauche , Diana	Amount of Contribution (\$) \$100.00 (\$) (\$) Amount of Contribution (\$) \$14.00

SCHEDULE	A1
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The	e Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/8 Rpt: 7/26	
2 FILE	ER NAME			3	Filer ID (Ethics Commissio	on Filers)
		Party of Fort Bend County (CEC)			00037828	,
4 Date	е	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
09/0	03/2024	Husfeld, Richard				\$20.00
		6 Contributor address; City; State; Zip Code		1		
		Katy, TX 77450				
8 Prin	icipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	⊥ s)		
	ired	· · · · · · · · · · · · · · · · · · ·	Retired	.,		
Date	е	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
09/0	03/2024	Jozwiak , Paul				\$30.00
		Contributor address; City; State; Zip Code		1		
		Rosenberg , TX 77471-4544				
		pation / Job title (See Instructions)	Employer (See Instructions	3)		
Ret	ired		Retired			
Date	e	Full name of contributor out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	—
07/3	31/2024	Justice Jennifer Caughey Campain				\$5,000.00
		Contributor address; City; State; Zip Code		1		
		Houston , TX 77005-4336				
Drin		pation / Job title (See Instructions)	Employer (See Instructions	$\sum_{i=1}^{n}$		
1 11.1	icipai occa			>)		
Date	е	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
08/2	12/2024	Katy Boatman Campaign				\$5,000.00
		Contributor address; City; State; Zip Code		1		
		Houston , TX 77018				
Prin	icinal occu	pation / Job title (See Instructions)	Employer (See Instructions	L s)		
·		, , , , , , , , , , , , , , , , , , ,		-,		
Date	е	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
08/0	05/2024	Kristin Guiney Campaign				\$5,000.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77008				
Drin		pation / Job title (See Instructions)	Employer (See Instructions			
PIII	icipai occu	pation 7 Job title (See Instructions)	Employer (See Instructions	5)		

SCHEDULE A1

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/8 Rpt: 8/26	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Republican I	Party of Fort Bend County (CEC)			00037828	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	08/22/2024	Lipinski, John				\$2,500.00
		6 Contributor address; City; State; Zip Code		1		
		Sugar Land , TX 77478				
8	Principal occu Retired	upation / Job title (See Instructions)	9 Employer (See Instructions Retired	;)		
_	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/12/2024	Maritza Antu Campaign				\$5,000.00
		Contributor address; City; State; Zip Code		1		
		Houston , TX 77265-6881				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ال</u>		
	T mopuleter			' <i>'</i>		
—	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/22/2024	Montalvo, Evelyn				\$140.00
		Contributor address; City; State; Zip Code				
		Richmond , TX 77406-1345		Ĺ		
	Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
_				—		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#: Pallod Vijav)		Amount of Contribution (\$)	ቀን ፍሰብ በበ
	0910912024	Pallod, Vijay		-		\$2,500.00
		Contributor address; City; State; Zip Code				
		Sugar Land , TX 77479-2775				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Controller		Star Pipe Products			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/25/2024	Rain, Richard				\$30.00
		Contributor address; City; State; Zip Code				
		Richmond, TX 77469-5148				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L		
				,		

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1:					
		· ·		Sch: 6/8 Rpt: 9/26					
2	FILER NAME		3	Filer ID (Ethics Commissio	on Filers)				
	Republican I	Party of Fort Bend County (CEC)		00037828					
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)				
	08/22/2024	Republican Women's Club Of Katy				\$2,500.00			
		6 Contributor address; City; State; Zip Code		1					
		Katy, TX 77494-3759							
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)					
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)				
	09/03/2024	Sheikhani, Ali				\$3,000.00			
		Contributor address; City; State; Zip Code							
		Houston , TX 77036-2008							
	Principal occu	pation / Job title (See Instructions)	;)						
	Owner		Self						
F	Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)					
	09/18/2024	Silva, Denise				\$30.00			
		Contributor address; City; State; Zip Code							
		Sugar Land , TX 77479-6481							
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)					
	Retired		Retired						
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)				
	09/23/2024	Simply Products Co				\$30.00			
		Contributor address; City; State; Zip Code							
		Stafford , TX 77497							
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)					
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)				
	09/03/2024	Springob, Waltraud				\$1,000.00			
		Contributor address; City; State; Zip Code							
1									
1		Sugar Land , TX 77478							
Γ	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)					
1	Treasurer		Laredo Construction, Inc	с.					
1									

SCHEDULE A1

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/8 Rpt: 10/26	
2	FILER NAME		3	Filer ID (Ethics Commissio	on Filers)	
	Republican I	Party of Fort Bend County (CEC)			00037828	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/09/2024	Springob, Waltraud				\$50.00
		6 Contributor address; City; State; Zip Code				
		Sugar Land , TX 77478				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions)			
	Treasurer		Laredo Construction, Inc). 		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/09/2024	Stricker, Beverly				\$215.00
		Contributor address; City; State; Zip Code				
		Needville, TX 77461-8504				
		upation / Job title (See Instructions)	Employer (See Instructions))		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/16/2024	Susanna Dokupil Campaign				\$5,000.00
l		Contributor address; City; State; Zip Code				
		Houston , TX 77098-1002				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/22/2024	Tonya McLaughlin Campaign				\$5,000.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77008				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
		ļ				
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/22/2024	Vincent Morales Campaign Fund				\$2,500.00
		Contributor address; City; State; Zip Code				
		Rosenberg, TX 77471-1174				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	, ;)		
		ļ				
⊢		I	·			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/8 Rpt: 11/26 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Republican Party of Fort Bend County (CEC) 00037828 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 09/25/2024 \$5,000.00 Vincent Morales Campaign Fund 6 Contributor address; City; State; Zip Code Rosenberg, TX 77471-1174 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$)) 09/25/2024 \$250.00 Ward, Lane Contributor address; City; State; Zip Code Richmond, TX 77406-8133 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide exp	Office (Polling Printing Salarie	Overhe Expen S Expe s/Wag	nse es/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2					3	Filer ID (Ethics Commission Filers)	
	Sch: 1/15 Rpt: 12/26		Republican Party of Fort Bend Co	ounty (CEC)				00037828	
4	Date	5	Payee name						
	08/20/2024		Benton, William						
6	Amount (\$)	7	Payee address; City; State; Zip Code						
	\$319.30		1509 Georgina St						
			Rosenberg, TX 77471						
8	PURPOSE	(a)	Category (See Categories listed at the top of	this schedule)	(b) Description			
	OF EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.	
						FBC Fair Rei		, officeholder living expense	
						i be i ali ite		uisement	
9	Complete ONLY if direct		Candidate/Officeholder name	Office s	ough	t		Office held	
	expenditure to benefit C/OI	Η			U				
⊨	Date		Payee name						
	08/08/2024		CJ Park & Associates						
⊢	Amount (\$)		Payee address; City;	State; Zip (Code				
	\$6,500.00		6338 Wilshire Blvd	· •					
			Los Angeles , TX 77478						
	PURPOSE	(a)	Category (See Categories listed at the top of	this schedule)	(b) Description			
	OF EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T.	
	-					Office Rent	ι, TX,	, officeholder living expense	
						Onice Rent			
⊢	Complete ONLY if direct		Candidate/Officeholder name	Office s	Jough	t		Office held	
	expenditure to benefit C/OI	Η			U				
	Date		Payee name						
	08/09/2024		CJ Park & Associates						
	Amount (\$)		Payee address; City;	State; Zip (Code	9			
	\$1,800.00		6338 Wilshire Blvd						
			Los Angeles , TX 77478						
	PURPOSE	(a)	Category (See Categories listed at the top of	this schedule)	(b	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T.	
						Security Dep		, officeholder living expense t	
						Decany Dop	201	-	
-	Complete ONLY if direct	L(Candidate/Officeholder name	Office s	l ouah	t		Office held	
	expenditure to benefit C/OI			2					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 2/15 Rpt: 13/26	Republican Party of Fort Bend County (CEC)	00037828						
4	Date	Payee name							
	08/23/2024	CJ Park & Associates							
6	Amount (\$)	Payee address; City; State; Zip Code							
	\$6,500.00	6338 Wilshire Blvd	6338 Wilshire Blvd						
		Los Angeles , TX 77478							
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Office Overhead/Rental Expense	utside of Texas. Complete Schedule T.						
			TX, officeholder living expense						
		Office Rent							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/17/2024	Campaign Verify							
⊢	Amount (\$)	Payee address; City; State; Zip Code							
	\$95.00	1215 31st St NW							
		PO Box 3554							
		Washington, DC 20007-3423							
	PURPOSE OF	a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense						
		Campaign Ve							
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held						
	expenditure to benefit C/OI								
	Date	Payee name							
	09/03/2024	Chevron							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$63.27	1531 FM359							
		Richmond, TX 77406							
	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE		utside of Texas. Complete Schedule T.						
			TX, officeholder living expense						
		Fuel Expense							
L	0 1.1 0.111								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense hmittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/V	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
	Total pages Sabadula E1:	5				1,	Filer ID (Ethics Commission Filers)		
ľ	Sch: 3/15 Rpt: 14/26						Filer ID (Ethics Commission Filers) 00037828		
4	Date	5	Payee name						
	09/12/2024		Chevron						
6	Amount (\$)	7	Payee address; City; State; Zip Code						
	\$76.04		1531 FM359						
			Richmond, TX 77406						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sc	hedule)	(b) Description				
	OF EXPENDITURE		Travel In District		Check if travel		ide of Texas. Complete Schedule T.		
							, officeholder living expense		
					Fuel Expense	е			
L				- <i>m</i>					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sou	ght		Office held		
╞	Data	<u> </u>							
	Date		Payee name						
	09/03/2024		Cinnamons Bakery						
	Amount (\$) Payee address; City; State; Zip Code								
	\$256.80 13881 Southwest Fwy								
			Sugar Land , TX 77478-3533						
	PURPOSE	(a)	Category (See Categories listed at the top of this sc	hedule)	(b) Description				
	OF EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T.		
							, officeholder living expense		
					Meeting Exp	ens	se		
_				0.000					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sou	gnt		Office held		
⊢		_							
	Date		Payee name						
	09/18/2024		Comcast						
	Amount (\$)			e; Zip Co	de				
	\$567.31		PO Box 60533						
	ſ								
			City of Industry , CA 91716-0533						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sc	hedule)	(b) Description	_			
	EXPENDITURE		Office Overhead/Rental Expense				ide of Texas. Complete Schedule T.		
							, officeholder living expense		
							<u>.</u>		
	Complete ONL V if direct	Ļ	Candidate/Officeholder name	Office sou	aht		Office held		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			Unice sou	ynt		Onice neiu		
-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
_	Sch: 4/15 Rpt: 15/26	Republican Party of Fort Bend County (CEC)	00037828						
4	Date	5 Payee name							
	07/22/2024	Davidson, Donna							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$2,400.00	PO Box 12131							
		Austin , TX 78711-2131							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Legal Services	outside of Texas. Complete Schedule T.						
			TX, officeholder living expense						
		Legal Fees							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/06/2024	Domino's							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$242.48 12633 SH 30								
		College Station , TX 77845							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense						
		Meeting Expe							
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held						
	expenditure to benefit C/OF	0							
	Date	Payee name							
	09/06/2024	Domino's							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$242.48	12633 SH 30							
		College Station , TX 77845							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE		butside of Texas. Complete Schedule T.						
			TX, officeholder living expense						
		Meeting Expe	lise						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	·								

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhead/Rental Expense Th Food/Beverage Expense Polling Expense Th - Gift/Awards/Memorials Expense Printing Expense Th			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 5/15 Rpt: 16/26		Republican Party of Fort Bend County	(CEC)			00037828		
4	Date	5	Payee name						
	07/02/2024		Eberle, Robert						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$400.00		9506 Plaza Terrace Drive						
			Missouri City, TX 77459						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Event Expense	,			ide of Texas. Complete Schedule T.		
	EXFENDITORE						, officeholder living expense		
					Reimbursem	ent	for Event Expenses		
_									
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ght		Office held		
⊨	Date		Payee name						
	08/12/2024		India Culture Center						
⊢	Amount (\$)			Zip Co					
	\$250.00		8888 West Bellfort Ste 210D	210 00					
			Houston, TX 77031						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Event Expense				ide of Texas. Complete Schedule T.		
							, officeholder living expense		
					Booth Spons	ors	nip		
-	Complete ONLY if direct		Candidate/Officeholder name O	office sou	ht		Office held		
	expenditure to benefit C/OF				jin				
	Date		Payee name						
	08/07/2024		Krishna Sounds						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$750.00		6350 Alpine Trail Lane						
			Katy, TX 77494						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Event Expense				ide of Texas. Complete Schedule T.		
							officeholder living expense		
					Sound equip	me	nt rental for event		
_	Complete ONLV if direct	L	Candidate/Officeholder name O	offico corr	sht		Office held		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			office sou	JIIL		Onice neid		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME		-	3	Filer ID (Ethics Commission Filers)			
	Sch: 6/15 Rpt: 17/26		Republican Party of Fort Bend County	00037828						
4	Date	5	Payee name							
	08/15/2024		Krishna Sounds							
6	Amount (\$)	7	Payee address; City; State; Zip Code							
	\$750.00		6350 Alpine Trail Lane							
			Katy, TX 77494							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Event Expense				ide of Texas. Complete Schedule T.			
					CEC Meeting		, officeholder living expense			
						9				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name C	Dffice sou	Jht		Office held			
	Date		Payee name							
	08/20/2024		Leal, Sharon							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$68.05 12015 Meadowdale Dr									
			Meadows Place, TX 77477							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Advertising Expense	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense DURSEMENT			
					-					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	Jht		Office held			
	Date		Payee name							
	09/20/2024		Lee, Jacob							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$2,567.79		627 Royal Lakes Blvd							
			Richmond, TX 77469-9836							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Event Expense		Check if Austir	n, TX	ide of Texas. Complete Schedule T. , officeholder living expense for Carlson Event			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	ıht		Office held			

			EXPENDITURE CA	TEGORIES I	-OR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhead/Rental Expense Ti Food/Beverage Expense Polling Expense Ti - Gift/Awards/Memorials Expense Printing Expense Ti		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2		-		-	3	Filer ID (Ethics Commission Filers)	
	Sch: 7/15 Rpt: 18/26							00037828	
4	Date	5	Payee name						
	08/30/2024		McCarty, Kristen						
6	Amount (\$)	7	Payee address; City; State; Zip Code						
	\$138.22		2611 Domineco LN						
			Katy, TX 77450-5373						
8	PURPOSE OF	(a)	Category (See Categories listed at the top o	f this schedule)	0	b) Description			
	EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.	
						Election Trai		, officeholder living expense	
							, ini ić	9	
9	Complete ONLY if direct		Candidate/Officeholder name	Office		ht		Office held	
Ĺ	expenditure to benefit C/OF			Onice	soug				
	Date		Payee name						
	07/31/2024		NBD Graphics						
	Amount (\$)		Payee address; City;	State; Zip	Cod	е			
	\$3,897.00 917 S. Mason Rd.								
	-								
			Katy , TX 77405						
	PURPOSE OF	(a)	Category (See Categories listed at the top of	f this schedule)	0	b) Description			
	EXPENDITURE		Printing Expense					ide of Texas. Complete Schedule T. , officeholder living expense	
						Printing Expe			
							5110		
⊢	Complete <u>ONLY</u> if direct		Candidate/Officeholder name	Office	soua	ht		Office held	
	expenditure to benefit C/Oł				5				
	Date		Payee name						
	09/03/2024		NBD Graphics						
	Amount (\$)		Payee address; City;	State; Zip	Cod	е			
	\$108.25		917 S. Mason Rd.						
			Katy , TX 77405						
	PURPOSE OF	(a)	Category (See Categories listed at the top o	f this schedule)	(b) Description			
	EXPENDITURE		Printing Expense					ide of Texas. Complete Schedule T.	
								, officeholder living expense	
						r muny ⊏xµ	5115		
_	Complete ONLY if direct	Ľ	Candidate/Officeholder name	Office		bt		Office held	
	expenditure to benefit C/Oł			Office	soug	i it		Onice neiu	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense - Gift/Awards/Memorials Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	· · · · · ·	3 Filer ID (Ethics Commission Filers)						
	Sch: 8/15 Rpt: 19/26	Republican Party of Fort Bend County (CEC)	00037828						
4	Date 09/09/2024	Payee name NBD Graphics							
6	Amount (\$) \$3,897.00	 Payee address; City; State; Zip Code 917 S. Mason Rd. Katy , TX 77405 							
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing Expense								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/18/2024	OfficeDepot Office Max							
	Amount (\$) \$93.14	Payee address; City; State; Zip Code 5766 Hwy 6							
	DUDDOSE	Missouri City, TX 77459							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense S						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/24/2024	Raconteur Media Company							
	Amount (\$) \$4,200.00	Payee address; City; State; Zip Code PO Box 26511							
		Austin , TX 78755-0511							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense 24 Digital Advertising						
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhead/Rental Expense Tr Food/Beverage Expense Polling Expense Tr - Gift/Awards/Memorials Expense Printing Expense Tr		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 9/15 Rpt: 20/26		Republican Party of Fort Bend County ((CEC)			00037828		
4	Date	5	Payee name						
	07/17/2024		Ramsey , Yvonne						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$747.82		5603 Mimosa Ln						
			Richmond , TX 77406-9643						
8	PURPOSE				(b) Description				
0	OF	(⁰)	Category (See Categories listed at the top of this sche Office Overhead/Rental Expense	edule)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE						, officeholder living expense		
					Reimbursem	ent	for Office Supplies		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O)ffice sou	yht		Office held		
	Date	Γ	Payee name						
	08/05/2024		Safari Texas Ranch						
	Amount (\$)	┝		Zip Co	40				
	()				le				
	\$750.75 11627 FM 1464								
			Richmond, TX 77479						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Event Expense	edule)		, TX	ide of Texas. Complete Schedule T. , officeholder living expense ing		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name O)ffice sou	ght		Office held		
	Date	Γ	Payee name						
	08/15/2024		Safari Texas Ranch						
	Amount (\$)	┢	Payee address; City; State;	Zip Co	he				
	\$750.75		11627 FM 1464	210 00					
	\$150.15		11027 FW 1404						
			Richmond, TX 77479						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Event Expense				ide of Texas. Complete Schedule T.		
							, officeholder living expense		
					CEC Meeting	J			
					-				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ght		Office held		
		· 							

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/- al Cor	Fees Office Overhead/Rental Expense Transportat Food/Beverage Expense Polling Expense Travel in Di - Gift/Awards/Memorials Expense Printing Expense Travel Out			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 10/15 Rpt: 21/26		Republican Party of Fort Bend	00037828					
4	Date	5	Payee name				<u> </u>		
	07/19/2024		Seth & Alexander Advisors						
6	Amount (\$)	7	Payee address; City;	State	; Zip Coo	le			
	\$1,000.00		3 Sugar Creek Center Blvd						
			Sugar Land, TX 77478						
8	PURPOSE	<u> </u>	Category (See Categories listed at the	top of this sch	hodule)	(b) Description			
	OF		Accounting/Banking	lop or this som	leuule)		outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE							, officeholder living expense	
						Accounting E	ixpe	ense	
Ĺ									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	iht		Office held	
	Date		Payee name						
	08/20/2024		Seth & Alexander Advisors						
	Amount (\$)	\vdash	Payee address; City;	State	; Zip Coo	le			
	\$1,000.00		3 Sugar Creek Center Blvd						
		-	Sugar Land, TX 77478		T				
	PURPOSE OF		Category (See Categories listed at the	top of this sch	nedule)	(b) Description	outei	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Accounting/Banking					, officeholder living expense	
						Accounting E			
						-	•		
	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name	(I Office soug	Jht		Office held	
	expenditure to benefit C/OF	Н							
⊨	Date	Γ	Payee name						
	09/20/2024		Seth & Alexander Advisors						
-	Amount (\$)	⊢	Payee address; City;	State	; Zip Coo	1e			
	\$1,000.00		3 Sugar Creek Center Blvd	C ,	, <u> </u>				
	. ,		• • • • • • • • • • • • • • • • • • •						
			Sugar Land, TX 77478						
	PURPOSE OF		Category (See Categories listed at the	top of this sch	redule)	(b) Description			
	EXPENDITURE		Accounting/Banking					ide of Texas. Complete Schedule T. , officeholder living expense	
						Bookkeeping			
						Doorane - pri g	-	,pence	
	Complete ONLY if direct		Candidate/Officeholder name	(Office soug			Office held	
	expenditure to benefit C/OH								

EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Odflice Overhead/Rental Expense Food/Beverage Expense Offlice Overhead/Rental Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)					
Ĺ	Sch: 11/15 Rpt: 22/26	Republican Party of Fort Bend County (CEC)	00037828					
4	Date 07/26/2024	5 Payee name Shell						
6	Amount (\$) \$76.95	7 Payee address; City; State; Zip Code 2465 FM 1092 Rd Missouri City, TX 77459						
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel Expense 						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date 08/02/2024	Payee name Shell						
	Amount (\$) \$74.91	Payee address; City; State; Zip Code 2465 FM 1092 Rd Missouri City, TX 77459						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Office held						
	Date	Payee name						
	09/23/2024	Shell						
	Amount (\$) \$63.19	Payee address; City; State; Zip Code 2465 FM 1092 Rd						
		Missouri City, TX 77459						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Co Credit Card Payment		Event Expense Loan Repayment/Reimburseme Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense		d/Rental Expense e /Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 12/15 Rpt: 23/26		Republican Party of Fort Bend County	(CEC)				00037828	
4	Date	5	Payee name						
	08/05/2024		Snowflake Donuts						
6	Amount (\$)	7	7 Payee address; City; State; Zip Code						
	\$52.50		4225 Sienna Pkwy						
			#210						
			Missouri City , TX 77459						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche		(b)	Description			
Ū	OF	(,	Food/Beverage Expense	edule)	(~)		outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE					Check if Austin	, TX,	, officeholder living expense	
						Meeting Expe	ens	e	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	ght			Office held	
	Date		Payee name						
	07/12/2024		TemplatedDiscount						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$125.00		6652 US-79						
	+==0.00								
			Hutto, TX 78634						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description			
	EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T. , officeholder living expense	
	Website Expense								
							00		
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	aht			Office held	
	expenditure to benefit C/OI				9				
	Date		Payee name						
	08/05/2024		TemplatedDiscount						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$1,000.00		6652 US-79	•					
			Hutto, TX 78634						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T.	
								, officeholder living expense	
						Website Expe	5115		
	Complete ONILV & diversit	Ļ	Condidate/Office halder as mo		a h t			Office hold	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ynt			Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)					
1	Sch: 13/15 Rpt: 24/26	Republican Party of Fort Bend County (CEC)	00037828					
4	Date 08/12/2024	5 Payee name TemplatedDiscount						
6	Amount (\$) \$125.00	7 Payee address; City; State; Zip Code 6652 US-79 Hutto, TX 78634						
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website Expense 						
9	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office held Office held							
	Date	Payee name						
	08/15/2024	TemplatedDiscount						
	Amount (\$) \$54.00	Payee address; City; State; Zip Code 6652 US-79 Hutto, TX 78634						
	PURPOSE OF EXPENDITURE	utside of Texas. Complete Schedule T. TX, officeholder living expense NSE						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Office held						
	Date	Payee name						
	09/03/2024	TemplatedDiscount						
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 6652 US-79						
		Hutto, TX 78634 (a) Category (See Categories listed at the top of this schedule) (b) Description						
	PURPOSE OF EXPENDITURE	utside of Texas. Complete Schedule T. TX, officeholder living expense NSE						
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held					

EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)					
-	Sch: 14/15 Rpt: 25/26	Republican Party of Fort Bend County (CEC)	00037828					
4	Date 09/12/2024	5 Payee name TemplatedDiscount						
6	Amount (\$) \$125.00	7 Payee address; City; State; Zip Code 6652 US-79 Hutto, TX 78634						
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website Expense 						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/08/2024	Техасо						
	Amount (\$) \$76.59	Payee address; City; State; Zip Code 24985 Katy Fwy						
		Katy, TX 77494						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office held Office held Office held								
	Date	Payee name						
	08/14/2024	Техасо						
	Amount (\$) \$73.17	Payee address; City; State; Zip Code 24985 Katy Fwy						
		Katy, TX 77494						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overh Food/Beverage Expense Polling Expense By - Gift/Awards/Memorials Expense Printing Expe			ment/Reinbursement head/Rental Expense ense gense ages/Contract Labor	tr/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District e Travel Out of District (Contract Labor OTHER (enter a category not listed above)		
					-			
1	Total pages Schedule F1:	2 FILER NAME				3 Filer ID	(Ethics Commission Filers)	
	Sch: 15/15 Rpt: 26/26	Republican Par	ty of Fort Bend Coun	ty (CEC)		00037828		
4	Date	5 Payee name						
	08/08/2024							
_								
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$25.00	420 Montgomer	y Street					
		San Francisco,	CA 94104					
8	PURPOSE	(a) Catagony			b) Description			
Ŭ	OF	(a) Category (See Cat Fees	egories listed at the top of this	schedule)		outside of Texas. Com	nlete Schedule T	
	EXPENDITURE	rees				, TX, officeholder living		
					Bank Fee			
9	Complete ONLY if direct	Candidate/Officeho	lder name	Office soug	ht	Office he	ald	
9	expenditure to benefit C/OI			Onice Soug	in	Once ne	nu	
	•							
	Date	Payee name						
	08/09/2024	Wells Fargo Ba	nk, N.A					
	Amount (\$)	Payee address;	City; Sta	te; Zip Coc	le			
	\$25.00	420 Montgomer		· •				
	φ20.00	420 Montgomer	y ou cou					
		San Francisco,	CA 94104					
	PURPOSE	(a) Category (See Cat	egories listed at the top of this	schedule)	b) Description			
	OF EXPENDITURE	Fees				outside of Texas. Com		
						, TX, officeholder living	expense	
					Bank Fees			
	Complete ONLY if direct	Candidate/Officeho	lder name	Office soug	ht	Office he	eld	
	expenditure to benefit C/OI	1						