COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

FORM CEC COVER SHEET PG 1

Tł	ne CEC Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00053162	2 Total pages filed: 103				
3	COMMITTEE NAME	1	OFFICE USE ONLY					
	Collin County Rep	ublican Party (CEC)		Date Received				
		1		ELECTRONICALLY FILED 10/07/2024				
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CIT	TY; STATE; ZIP CODE					
	_	2701 W 15th Street Suite 572		Date Hand-delivered or Date Postmarked				
	Change of Address	Plano, TX 75075		Receipt # Amount				
				, and and				
				Date Processed				
				Date Imaged				
5	CAMPAIGN	MS / MRS / MR FIRST		MI				
	TREASURER NAME	James P.						
		NICKNAME LAST		SUFFIX				
		Farley						
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY;	STATE; ZIP CODE				
	TREASURER STREET ADDRESS	2213 Old Orchard Drive						
	(Residence or Business)	Plano, TX 75023						
7	CAMPAIGN	STREET OR PO BOX;	APT / SUITE #; CITY	; STATE; ZIP CODE				
	TREASURER MAILING ADDRESS	PO Box 260687						
	Change of Address	Plano, TX 75026						
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION					
	TREASURER PHONE	(214) 683-5388						
9	REPORT TYPE	January 15 X 30	Oth day before election	Final Report				
		8t	h day before election	10th day after campaign treasurer				
			unoff	termination				
				Voor				
	PERIOD COVERED	Month Day Year 07/01/2024 TH	Month Day HROUGH 09/26/202	Year 4				
11	. ELECTION	ELECTION DATE						
		Month Day Year	Primary Runoff	Other				
			General Special					
┝								
Ļ	GO TO PAGE 2							
⊢ 0	rms provided by Te	xas Ethics Commission www.et	thics.state.tx.us	Version V4.1.0.48da51f7				

FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME				13 File	er ID	(Ethics Commission Filers)
Collin County Republican Party (CEC) 000						
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Donald Trump Presiden			
(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 GUARA	L CONTRIBUTIONS (OTHER NTEES OF LOANS, OR TRONICALLY) 1e higher itemization threshold	THAN	\$	21,246.00
	2. TOTAL POLITIC (OTHER THAN P		I BUTIONS NNS, OR GUARANTEES OF LO	OANS)	\$	50,001.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES					0.00
	4. TOTAL POLITIC	CAL EXPENI	DITURES		\$	37,470.45
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT		TIONS MAINTAINED AS OF TI	HE LAST DAY	\$	173,160.32
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPA LAST DAY OF TH		F ALL OUTSTANDING LOANS G PERIOD	S AS OF THE	\$	0.00
16 AFFIDAVIT			I swear, or affirm, under per true and correct and include under Title 15, Election Cod	s all information		
			Signat	James P. Far	-	er
			Signat	a.o or campaign	. neusun	. .
AFFIX NOTARY	STAMP / SEAL ABOV	E				
				, this the		day
of	_, 20, to certi	y which, witne	ss my hand and seal of office.			
Signature of officer ad	ministering oath	Printed nam	ne of officer administering oath	Title	e of office	er administering oath
Forms provided by Texas E	thics Commission	WW	w.ethics.state.tx.us			Version V4.1.0.48da51f7

12 COMMITTEE NAME

ADDENDUM

Collin County Republican	Party (CEC)			00053162	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Ted Cruz Senator		
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Keith Self US House of Rep	resentatives	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Pat Fallon US House of Rep	presentatives	
(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.)				
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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Collin County Republican F	Party (CEC)			00053162	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Darrell Day US House of Rep	presentatives	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Christi Craddick Railroad Cor	nmissioner	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jimmy Blacklock Supreme Co	ourt Chief Justice	
(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.)				
		1			

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)		
Collin County Republican I	Party (CEC)			00053162			
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		A. Supported John Devine Supreme Court Justice				
(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.)						
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Jane Bland Supreme Court	Justice			
(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.)						
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	David Schenck Court Of Cri	iminal Appeals, Jud	ge		
(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.)						

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Collin County Republican F	Party (CEC)			00053162	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Gina Parker Court Of Criminal A	Appeals, Judge	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Lee Finley Court Of Criminal Ap	peals, Judge	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Pam Little State Board Of Educ	ation	
(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.)				
	applicable, classify by party.)		ethios state ty us		Varaian VA 1.0.49daE1f7

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Collin County Republican F	Party (CEC)			00053162	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Angela Paxton State Senator		
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Brent Hagenbuch State Senato	r	
(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.)				
COMMITTEE	1. Candidates	A. Supported	JJ Koch Court of Appeals, Chief	Justice	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		33 Roch Court of Appeals, Chief	JUSIICE	
(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.)				

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Collin County Republican I				00053162		
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Earl Jackson	Court Of Appeals,	Justice	
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Gino Rossini	Court Of Appeals,	Justice	
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mike Lee Cou	rt Of Appeals, Jus	tice	
(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.)					

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Collin County Republican F	Party (CEC)			00053162	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Emily Miskel Court Of Appeals,	Justice	
(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.)				
COMMITTEE			looping Louin Court Of America	Justice	
ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jessica Lewis Court Of Appeals	, Justice	
(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.)				
COMMITTEE	1. Candidates	A Supported	Cynthia Barbare Court Of Appea		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			ais, Justice	
(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.)				

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)		
Collin County Republican Party (CEC)				00053162			
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Matthew Kolodoski Court Of Appeals, Justice				
(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. SupportedB. Opposed					
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Susan Fletcher County Commis	sioner			
(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.)						
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Darrell Hale County Commission	ner			
(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.)						
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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Collin County Republican F				00053162		
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Matt Carpenter	Constable		
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Dwayne Kurtz	Constable		
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Sammy Knapp	Constable		
(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.)					
	approace, erassing by party.)	1				

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Collin County Republican	Party (CEC)			00053162	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Steve Asher Constable	I	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Katrina Pierson State Represen	tative	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Keresa Richardson State Repre	esentative	
(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.)				

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Collin County Republican F				00053162		
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Matt Shaheer	State Representa	ative	
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Steve Kinard	State Representat	ive	
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Candy Noble	State Representat	ive	
(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.)	1				

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12 COMMITTEE NAME		13 Filer ID (Ethics Commission Filers)
Collin County Republican Party (CEC)		00053162
14 COMMITTEE 1. Candidates ACTIVITY (Identify by name or, if applicable, classify by party.)	A. Supported Piper McGraw District Judge	
(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	
 Officeholders Assisted (Identify by name or, if applicable, classify by party.) 		
COMMITTEE 1. Candidates ACTIVITY (Identify by name or, if applicable, classify by party.)	A. Supported Angela Tucker District Judge	
(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.)		
COMMITTEE 1. Candidates ACTIVITY (Identify by name or, if applicable, classify by party.)	A. Supported Ben Smith District Judge	
(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.)		

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Collin County Republican I	Party (CEC)			00053162	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Kim Laseter District Judge		
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Brook Fulks District Judge		
(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.)				
COMMITTEE	1. Candidates	A. Supported	Andrea Thompson District Juc	lae	
ACTIVITY	(Identify by name or, if applicable, classify by party.)			-9-	
(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.)				

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Collin County Republican F	Party (CEC)				00053162	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supporte	d Lynsey Wynne Dis	trict Judge		
(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. Supporte	d			
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		d Andrea Bouressa I	District Judge		
(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. Supporte	d			
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		d Christine Nowak D	istrict Judge		
(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. Supporte	d			
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	1	1				

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Collin County Republican I				00053162		
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Sarah Duff	Probate Judge		
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Jim Skinner	Sheriff		
(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.)					
COMMITTEE	1. Candidates	A. Supported	Scott Grigg	Tax Assessor		
ACTIVITY	(Identify by name or, if applicable, classify by party.)					
(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.)					

SUBTOTALS - CEC		FOCOVER SH	DRM CEC HEET PG 3 18 of 103
17 COMMITTEE NAME Collin County Republican Party (CEC)	18 Filer ID 000531		mission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTO	DTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	50,001.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBU	JTIONS	\$	
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4. X SCHEDULE E: LOANS		\$	0.00
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CO	NTRIBUTIONS	\$	37,470.45
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL	CONTRIBUTIONS	\$	
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL	CONTRIBUTIONS	\$	
10. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONT TO FILER	TRIBUTIONS RETURNED	\$	68.28

-							
	The Instru	ction Guide explains how to comple	te this fo	orm.	1	Total pages Schedule A1: Sch: 1/46 Rpt: 19/103	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
-		y Republican Party (CEC)				00053162	
4	Date	5 Full name of contributor out-of-state	PAC (ID#:)	7	Amount of Contribution (\$)	
	08/05/2024	Arrant, Debora					\$10.00
		6 Contributor address; City; State; Zip Code					
Ļ	D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Plano, TX 75074-3585			Ĺ		
8	Principal occu Retired	pation / Job title (See Instructions)		9 Employer (See Instructions Retired	5)		
	Date		PAC (ID#:_)		Amount of Contribution (\$)	÷00.00
	08/05/2024						\$20.00
		Contributor address; City; State; Zip Code					
		Plano, TX 75074-3585					
\vdash	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	 ;)		
	Retired			Retired	')		
╞	Date	Full name of contributor out-of-state)		Amount of Contribution (\$)	
	09/16/2024	Atkinson, Daniel Scott				Amount of Contineation (*)	\$123.89
	00,20.222	Contributor address; City; State; Zip Code					+
		Dallas, TX 75252					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Engineer			self			
Γ	Date	Full name of contributor out-of-state	PAC (ID#:)		Amount of Contribution (\$)	
	07/20/2024	Atkinson, Debbi					\$260.05
		Contributor address; City; State; Zip Code					
	Duin singly good	McKinney, TX 75072			Ĺ		
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
╘				Relieu	-		
	Date	Full name of contributor out-of-state	PAC (ID#:)		Amount of Contribution (\$)	¢10.00
	07/02/2024	Bao, Lily					\$10.00
		Contributor address; City; State; Zip Code					
		Plano, TX 75025					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Realtor			Legacy Premier Group			

	The Instru	ction Guide explains how to complete this	s forn	n.	1	Total pages Schedule A1: Sch: 2/46 Rpt: 20/103	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		y Republican Party (CEC)			-	00053162	
4	Date	5 Full name of contributor out-of-state PAC (ID#)#:)	7	Amount of Contribution (\$)	
	07/01/2024	Bao, Lily					\$10.00
	I	6 Contributor address; City; State; Zip Code					
	I						
	I						
		Plano, TX 75025					
8		pation / Job title (See Instructions)		Employer (See Instructions)		
	Realtor			Legacy Premier Group			
	Date	Full name of contributor out-of-state PAC (ID#)#:)		Amount of Contribution (\$)	
	08/01/2024	Bao, Lily					\$10.00
	I	Contributor address; City; State; Zip Code					
	I						
	I						
		Plano, TX 75025					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions)		
	Realtor			Legacy Premier Group			
	Date	Full name of contributor out-of-state PAC (ID#	D#:)		Amount of Contribution (\$)	
	07/27/2024	Beckham, Christina					\$10.00
	I	Contributor address; City; State; Zip Code					
	I						
	I						
		Frisco, TX 75035					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions)		
	Retired			Retired			
	Date	Full name of contributor out-of-state PAC (ID#)#:)		Amount of Contribution (\$)	
	07/07/2024	Bergerson, Ashley					\$25.00
	1	Contributor address; City; State; Zip Code					
	I						
	I						
		Anna, TX 75409					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions)		
	Investment E	3anking		SitusAMC			
	Date	Full name of contributor out-of-state PAC (ID#)#:)		Amount of Contribution (\$)	
	08/07/2024	Bergerson, Ashley					\$25.00
	I	Contributor address; City; State; Zip Code					
	I						
	I						
		Anna, TX 75409					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Investment E	3anking		SitusAMC			

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A Sch: 3/46 Rpt: 21/103	
2 FILER NAME	3 Filer ID (Ethics Commi	ssion Filers)
Collin County Republican Party (CEC)	00053162	
4 Date 5 Full name of contributor out-of-state PAC (ID#:	_) 7 Amount of Contribution (\$)
09/07/2024 Bergerson, Ashley		\$25.00
6 Contributor address; City; State; Zip Code		
Anna, TX 75409		
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instru	Ictions)	
Investment Banking SitusAMC		
Date Full name of contributor out-of-state PAC (ID#:	_) Amount of Contribution (\$)
07/02/2024 Bickford, Chris		\$10.72
Contributor address; City; State; Zip Code		
Allen, TX 75002		
Principal occupation / Job title (See Instructions) Employer (See Instru	ctions)	
IT manager BCBSTX		
Date Full name of contributor out-of-state PAC (ID#:	_) Amount of Contribution (\$)
08/02/2024 Bickford, Chris		\$10.72
Contributor address; City; State; Zip Code		
Allen, TX 75002		
Principal occupation / Job title (See Instructions) Employer (See Instru	ctions)	
IT manager BCBSTX		
Date Full name of contributor out-of-state PAC (ID#:	_) Amount of Contribution (\$)
09/02/2024 Bickford, Chris		\$10.72
Contributor address; City; State; Zip Code		
Allen, TX 75002		
Principal occupation / Job title (See Instructions) Employer (See Instru	ctions)	
IT manager BCBSTX		
Date Full name of contributor out-of-state PAC (ID#:	_) Amount of Contribution (
07/01/2024 Blackburn, Patricia		\$10.00
Contributor address; City; State; Zip Code		
Contributor address; City; State; Zip Code		
Contributor address; City; State; Zip Code Frisco, TX 75035	······	
Contributor address; City; State; Zip Code Frisco, TX 75035 Principal occupation / Job title (See Instructions) Employer (See Instru		
Contributor address; City; State; Zip Code Frisco, TX 75035		

The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A1: Sch: 4/46 Rpt: 22/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Collin Count	ty Republican Party (CEC)		00053162
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/27/2024	Blackburn, Patricia		\$10.00
	6 Contributor address; City; State; Zip Code		
	Frisco, TX 75035		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	2)
CEO		PBNJ Solutions LLC	5/
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
08/27/2024	Blackburn, Patricia)	Amount of Contribution (\$) \$10.00
00/21/2024			\$10.00
	Contributor address; City; State; Zip Code		
	Frisco, TX 75035		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
CEO		PBNJ Solutions LLC	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/05/2024	Blackwell, Melvin		\$20.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75023		
-	upation / Job title (See Instructions)	Employer (See Instructions	5)
retired		retired	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/02/2024	Blencowe, Debra		\$10.00
	Contributor address; City; State; Zip Code		
	Princeton, TX 75407		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	
Assoc Facul		Collin College	5)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
07/08/2024	Blencowe, Debra)	\$10.00
01/00/2021	Contributor address; City; State; Zip Code		
	Princeton, TX 75407		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
Assoc Facu	lty	Collin College	

т	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 5/46 Rpt: 23/103
2 F	P FILER NAME			3 Filer ID (Ethics Commission Filers)
c	Collin Count	y Republican Party (CEC)		00053162
4 D	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
0	8/08/2024	Blencowe, Debra		\$10.00
		6 Contributor address; City; State; Zip Code		
		Princeton, TX 75407		
	Assoc Facul	pation / Job title (See Instructions)	 9 Employer (See Instructions Collin College 	»)
	Date	—)	Amount of Contribution (\$)
0	7/02/2024	Bollner, Dan		\$10.00
		Contributor address; City; State; Zip Code		
		Frisco, TX 75034		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	etired		retired	>/
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	7/28/2024	Bollner, Dan		\$10.00
		Contributor address; City; State; Zip Code		
		Frisco, TX 75034		
P	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions) S)
	etired		retired	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
0	8/28/2024	Bollner, Dan		\$10.00
		Contributor address; City; State; Zip Code		
		Frisco, TX 75034		
		pation / Job title (See Instructions)	Employer (See Instructions	3)
re	etired		retired	
C	Date	Full name of contributor 🛛 out-of-state PAC (ID#:_)	Amount of Contribution (\$)
0	7/02/2024	Botkin, Dennis		\$10.00
		Contributor address; City; State; Zip Code		
		Dishardson TV 75000		
┝	uin air I	Richardson, TX 75082		
		pation / Job title (See Instructions)	Employer (See Instructions	5)
	Quality Engi		SQA Serives	

1	The Instru	ction Guide explains how to complete this	form.	1	al pages Schedule A1: h: 6/46 Rpt: 24/103	
2 F	ILER NAME			3 File	er ID (Ethics Commission	Filers)
		y Republican Party (CEC)		1	053162	/
4 C	Date	5 Full name of contributor out-of-state PAC (ID#)	7 Am	ount of Contribution (\$)	
C	07/07/2024	Botkin, Dennis				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Richardson, TX 75082				
		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Quality Engi	neer	SQA Serives			
C	Date	Full name of contributor out-of-state PAC (ID#)	Am	ount of Contribution (\$)	
C	8/07/2024	Botkin, Dennis				\$10.00
		Contributor address; City; State; Zip Code		1		
		Richardson, TX 75082				
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Quality Engi	neer	SQA Serives			
0	Date	Full name of contributor out-of-state PAC (ID#)	Am	ount of Contribution (\$)	
C	08/14/2024	Brezette, Mark				\$50.00
		Contributor address; City; State; Zip Code				
		Allen, TX 75013				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
F	Real Estate	Broker	Self			
0	Date	Full name of contributor out-of-state PAC (ID#)	Am	ount of Contribution (\$)	
C	07/01/2024	Cassel, James				\$10.00
		Contributor address; City; State; Zip Code		1		
		Richardson, TX 75080	1			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
S	ales		self employed	-		
	Date	Full name of contributor out-of-state PAC (ID#)	Am	ount of Contribution (\$)	
C)7/27/2024	Cassel, James				\$10.00
		Contributor address; City; State; Zip Code				
		Richardson, TX 75080		Ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
s	ales		self employed			

The Instru	iction Guide explains how to complete thi	s form.	1 Total pages Schedule A1: Sch: 7/46 Rpt: 25/103	
2 FILER NAME			3 Filer ID (Ethics Commission Filers))
Collin Coun	ty Republican Party (CEC)		00053162	
4 Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7 Amount of Contribution (\$)	
08/27/2024	Cassel, James		\$10	0.00
	6 Contributor address; City; State; Zip Code]	
	Richardson, TX 75080			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)	
sales		self employed		
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of Contribution (\$)	
07/02/2024			\$10	0.00
	Contributor address; City; State; Zip Code		1	
	Plano, TX 75024	<u> </u>		
-	upation / Job title (See Instructions)	Employer (See Instructions	5)	
Web Develo	per	Perspecta		
Date	Full name of contributor out-of-state PAC (IE	D#:)	Amount of Contribution (\$)	
07/02/2024	Cassels, Jeff & Ann		\$10	0.00
	Contributor address; City; State; Zip Code		1	
D in single and	Plano, TX 75024			
Principal occu Web Develo	upation / Job title (See Instructions)	Employer (See Instructions Perspecta	5)	
			1	
Date	—	D#:)	Amount of Contribution (\$)	
08/02/2024			\$10	0.00
	Contributor address; City; State; Zip Code			
	Plano, TX 75024			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Web Develo	,	Perspecta	5)	
Date	·		Amount of Contribution (\$)	
07/19/2024		رر	\$168	8 00
0111312024			+	5.00
	Contributor address; City; State; Zip Code			
	Plano, TX 75024			
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions	5)	
-	iral Engineer	Alpha-C Engineering LL		
		· -		

			1 Tatal names Calendula A1
The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 8/46 Rpt: 26/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Collin Count	y Republican Party (CEC)		00053162
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/02/2024	Chambers, Robert		\$10.00
	6 Contributor address; City; State; Zip Code		•
	FRISCO, TX 75034	·	
	pation / Job title (See Instructions)	9 Employer (See Instructions	5)
retired		retired	
Date	—)	Amount of Contribution (\$)
07/02/2024	Chambers, Robert		\$10.00
	Contributor address; City; State; Zip Code		
Dringinal occu	FRISCO, TX 75034	Employer (See Instructions	
retired	ipation / Job title (See Instructions)	Employer (See Instructions retired	5)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/02/2024	Chambers, Robert		\$10.00
	Contributor address; City; State; Zip Code		
	FRISCO, TX 75034		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	5)
retired		retired	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/01/2024	Charles, Vickie		\$26.33
	Contributor address; City; State; Zip Code		
	Frisco, TX 75035	,	
	ipation / Job title (See Instructions)	Employer (See Instructions	6)
System Engi	ineer	Basis Technologies	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/28/2024	Charles, Vickie		\$26.33
	Contributor address; City; State; Zip Code		
	Frisco, TX 75035		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u></u>
System Engi		Basis Technologies	>/
		Dubio reonnoiogico	

	The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 9/46 Rpt: 27/103
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		y Republican Party (CEC)		00053162
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	08/28/2024	Charles, Vickie		\$26.33
		6 Contributor address; City; State; Zip Code		1
		Frisco, TX 75035		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
	System Engi		Basis Technologies	,
	Date			Amount of Contribution (\$)
	07/01/2024	Collin county Republican Primary Federal Accor) unt	\$1,342.91
	011011202-	Contributor address; City; State; Zip Code		\$\$\$,072.01
		Contributor address, City, State, Zip Code		
		Plano , TX 75075		
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	[5]
	-	•		·
	Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/10/2024	Cook, Austin		\$50.00
				•
		Plano, TX 75075		
		pation / Job title (See Instructions)	Employer (See Instructions	
	retired		retired	
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	07/07/2024	Cook, Kenneth		\$10.00
		Contributor address; City; State; Zip Code		
	Dringing oog	Allen, TX 75013		
	Principal occu RCIS	ipation / Job title (See Instructions)	Employer (See Instructions methodist richardson met	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/07/2024	Cook, Kenneth		\$10.00
		Contributor address; City; State; Zip Code		
		Allen, TX 75013		
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	RCIS		methodist richardson me	
<u> </u>				

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 10/46 Rpt: 28/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Collin Count	y Republican Party (CEC)		00053162
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/07/2024	Cook, Kenneth		\$10.
	6 Contributor address; City; State; Zip Code		
	Allen, TX 75013		
	pation / Job title (See Instructions)	9 Employer (See Instructions	
RCIS		methodist richardson me	edical center
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/02/2024	Curry, Charles		\$10.
	Contributor address; City; State; Zip Code		
	PLANO, TX 75023		
	pation / Job title (See Instructions)	Employer (See Instructions	
Purchasing		Telecom Electric Supply	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/18/2024	Curry, Charles		\$10.
	Contributor address; City; State; Zip Code		
	PLANO, TX 75023		
	pation / Job title (See Instructions)	Employer (See Instructions	
Purchasing		Telecom Electric Supply	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/18/2024	Curry, Charles		\$10.
	Contributor address; City; State; Zip Code		
	PLANO, TX 75023		
	pation / Job title (See Instructions)	Employer (See Instructions	
Purchasing		Telecom Electric Supply	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/30/2024	Daily, Bonnie		\$50.
	Contributor address; City; State; Zip Code		
	McKinney, TX 75070		
	pation / Job title (See Instructions)	Employer (See Instructions)
Retired		Retired	

6 Contributor address; City; State; Zip Code PLANO, TX 75074 PLANO, TX 75074 8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	lers) \$26.27
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) 08/14/2024 Dawson USN, PO2 Eddie 7 6 Contributor address; City; State; Zip Code 7 8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired 9 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	\$26.27
08/14/2024 Dawson USN, PO2 Eddie 6 Contributor address; City; State; Zip Code 9 Employer (See Instructions) Retired 9 Date Full name of contributor 0ut-of-state PAC (ID#:) Amount of Contribution (\$)	\$26.27
6 Contributor address; City; State; Zip Code 9 PLANO, TX 75074 8 Principal occuration / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired	\$26.27
6 Contributor address; City; State; Zip Code PLANO, TX 75074 8 Principal occuration / Job title (See Instructions) Retired P Entred Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Pate Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
Retired Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
	ľ
07/02/2024 Dippell, Paul	\$10.00
Contributor address; City; State; Zip Code	
PLANO, TX 75024	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
CEO Service Leadership Inc.	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
07/06/2024 Dippell, Paul	\$10.00
Contributor address; City; State; Zip Code	
PLANO, TX 75024	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
CEO Service Leadership Inc.	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
08/06/2024 Dippell, Paul	\$10.00
Contributor address; City; State; Zip Code	
PLANO, TX 75024	
Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO Service Leadership Inc.	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
	\$10.69
Contributor address; City; State; Zip Code	
Dringston TV 75407	
Princeton, TX 75407	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Engineer GE	

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/46 Rpt: 30/103	
2	FILER NAME			3	Filer ID (Ethics Commissi	on Filers)
	Collin Count	y Republican Party (CEC)			00053162	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/30/2024	Dowdell, Aaron				\$10.69
		6 Contributor address; City; State; Zip Code				
		1				
		Princeton, TX 75407				
8		pation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
	Engineer		GE			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/30/2024	Dowdell, Aaron				\$10.69
		Contributor address; City; State; Zip Code				
	ļ	1				
	ļ	1				
		Princeton, TX 75407				
		pation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Engineer		GE			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/30/2024	Edwards, Jeff				\$80.00
		Contributor address; City; State; Zip Code				
	ļ	1				
	ļ					
		McKinney, TX 75071				
		pation / Job title (See Instructions)	Employer (See Instructions)	;)		
	retired]	retired	—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/03/2024	Ferrer, James				\$120.00
	ļ	Contributor address; City; State; Zip Code				
	ļ	1				
		Diana TV 75022				
⊢	Dringing occu	Plano, TX 75023	Employer (See Instructions	$\sum_{i=1}^{n}$		
	engineer	pation / Job title (See Instructions)	Employer (See Instructions) Ericsson	<i>i</i>)		
╘				—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷10, 400, 70
	08/02/2024	GOP Primary Account				\$19,462.70
	ļ	Contributor address; City; State; Zip Code				
	ļ	1				
	ļ	Plano, TX 75075				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	\square		
	Phillipai occu			9		
⊢						

The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 13/46 Rpt: 31/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	y Republican Party (CEC)		00053162
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
08/12/2024	Grady, Richard		\$10.6
	6 Contributor address; City; State; Zip Code		
	Plano, TX 75025		
	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/12/2024	Grady, Richard		\$10.6
	Contributor address; City; State; Zip Code		
	Plano, TX 75025		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/02/2024	Grigg, Scott		\$10.0
	Contributor address; City; State; Zip Code		
	McKinney, TX 75070		
	pation / Job title (See Instructions)	Employer (See Instructions	6)
Tax Office F	inancial Operations Manager	Collin County	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/11/2024	Grigg, Scott		\$10.0
	Contributor address; City; State; Zip Code		1
	McKinney, TX 75070	<u>.</u>	
	ipation / Job title (See Instructions)	Employer (See Instructions	5)
Tax Office F	inancial Operations Manager	Collin County	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/11/2024	Grigg, Scott		\$10.0
	Contributor address; City; State; Zip Code		1
	McKinney, TX 75070	<u>.</u>	
-	upation / Job title (See Instructions)	Employer (See Instructions	6)
Tax Office F	inancial Operations Manager	Collin County	

	The Instru	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 14/46 Rpt: 32/103	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		ty Republican Party (CEC)			00053162	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/19/2024	HUDSON, RONALD				\$50.00
		6 Contributor address; City; State; Zip Code		1		
		MCKINNEY, TX 75070				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	INTERIOR D	JESIGNER	Self			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Τ	Amount of Contribution (\$)	
	08/05/2024	HUDSON, RONALD				\$50.00
		Contributor address; City; State; Zip Code		.		
		MCKINNEY, TX 75070				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	INTERIOR D	JESIGNER	Self			
	Date	Full name of contributor out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)	
	07/19/2024	Haggard, Susan				\$100.00
		Contributor address; City; State; Zip Code		.		
		Plano, TX 75024				
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	retired		retired			
	Date	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	08/05/2024	Haggard, Susan				\$100.00
		Contributor address; City; State; Zip Code		"		
L		Plano, TX 75024				
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	retired		retired			
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	08/21/2024	Henry, Byron				\$208.10
		Contributor address; City; State; Zip Code		"		
		Prosper, TX 75078	<u>.</u>			
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Lawyer		Scheef Stone LLP			

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 15/46 Rpt: 33/103
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Collin County Republican Party (CEC)	00053162
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/02/2024 Howard, Corbett	\$10.00
6 Contributor address; City; State; Zip Code	
Celina, TX 75009	<u> </u>
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Executive Director Celina Economic Development	-
	· · ·
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/17/2024 Howard, Corbett	\$10.00
Contributor address; City; State; Zip Code	
Celina, TX 75009	
Principal occupation / Job title (See Instructions) Employer (See Instructions	<u> </u> ;)
Executive Director Celina Economic Develo	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/17/2024 Howard, Corbett	\$10.00
Contributor address; City; State; Zip Code	
Celina, TX 75009	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Executive Director Celina Economic Develo	· · ·
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/01/2024 Huffines, Samuel	\$100.00
Contributor address; City; State; Zip Code	
Plano, TX 75093	
Principal occupation / Job title (See Instructions) Employer (See Instructions	<u> </u>
Auto Dealer Huffines Auto Dealership	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/27/2024 Huffines, Samuel	\$100.00
Contributor address; City; State; Zip Code	
Plano, TX 75093	
Plano, TX 75093 Principal occupation / Job title (See Instructions) Employer (See Instructions)	;)

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 16/46 Rpt: 34/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ty Republican Party (CEC)		00053162
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
08/27/2024	Huffines, Samuel		\$100.00
	6 Contributor address; City; State; Zip Code		
	Plano, TX 75093	-	
	upation / Job title (See Instructions)	9 Employer (See Instructions	
Auto Dealer		Huffines Auto Dealershi	ips
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/02/2024	Jenkins, Bernard		\$10.00
	Contributor address; City; State; Zip Code		1
	Plano, TX 75023		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)
Teacher		Lewisville ISD	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/21/2024	Jenkins, Bernard		\$10.00
	Contributor address; City; State; Zip Code		1
	Plano, TX 75023		
-	upation / Job title (See Instructions)	Employer (See Instructions	5)
Teacher		Lewisville ISD	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/21/2024	Jenkins, Bernard		\$10.00
	Contributor address; City; State; Zip Code		1
	Plano, TX 75023		
	upation / Job title (See Instructions)	Employer (See Instructions	5)
Teacher		Lewisville ISD	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/02/2024	John, Jensen		\$10.00
	Contributor address; City; State; Zip Code	1	
	McKinney, TX 75070		
	upation / Job title (See Instructions)	Employer (See Instructions	5)
Engineering	Consultant	LM Consultants	

The Instruction G	uide explains how to complete this f	1 Total pages Schedule A1: Sch: 17/46 Rpt: 35/103			
2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
Collin County Repub	lican Party (CEC)	00053162	-,		
4 Date 5 Full r	Date 5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$)		
07/07/2024 Johr			\$10	.0.00	
6 Cont	ributor address; City; State; Zip Code				
McK	inney, TX 75070				
8 Principal occupation / J	ob title (See Instructions)	9 Employer (See Instructions)		
Engineering Consulta	ant	LM Consultants			
Date Full r	name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)		
08/07/2024 Johr	n, Jensen			.0.00	
McK	inney, TX 75070				
Principal occupation / J	ob title (See Instructions)	Employer (See Instructions)		
Engineering Consult	ant	LM Consultants			
Date Full r	name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
Date Full name of contributor out-of-state PAC (ID#: 08/13/2024 Johnson, Alan				6.15	
	ributor address; City; State; Zip Code		+	0.20	
Cont	induction address, only, state, zip code				
Plan	o, TX 75074				
Principal occupation / J	ob title (See Instructions)	Employer (See Instructions)		
Retired		Retired			
Date Full r	name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
07/25/2024 Johr	nson, Diane			4.98	
Cont	ributor address; City; State; Zip Code				
Plan	o, TX 75074-4615				
Principal occupation / Job title (See Instructions) Employer (See Instruction)		
Retired		Retired			
Date Full r	name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)		
07/01/2024 Johr	nson, Kelly			0.00	
	ributor address; City; State; Zip Code				
Plan	o, TX 75093				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Office Manager		Self			
		Jell			
		361			

The Instruction Guide explains how to complete this form.					1 Total pages Schedule A1: Sch: 18/46 Rpt: 36/103			
2 FILER NAME					3 Filer ID (Ethics Commission Filers)			
Collin County Republican Party (CEC)					62	,		
4	Date	5 Full name of contributor out-of-state PAC (ID	D#:)	7 Amount of	Amount of Contribution (\$)			
	07/27/2024	Johnson, Kelly				\$10.00		
		6 Contributor address; City; State; Zip Code						
		Plano, TX 75093						
8		upation / Job title (See Instructions)	9 Employer (See Instruction:	6)				
	Office Manag	ger	Self					
	Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount o	of Contribution (\$)			
	08/27/2024	Johnson, Kelly				\$10.00		
		Contributor address; City; State; Zip Code						
		Plano, TX 75093						
		upation / Job title (See Instructions)	Employer (See Instruction	6)				
	Office Manag	ger	Self					
	Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount o	of Contribution (\$)			
	07/01/2024	Johnson, Randell				\$10.00		
		Contributor address; City; State; Zip Code						
	<u> </u>	Plano, TX 75093	<u> </u>	_				
	•	ipation / Job title (See Instructions)	Employer (See Instruction	6)				
	Attorney		Self	•				
	Date		D#:)	Amount o	of Contribution (\$)			
	07/27/2024	Johnson, Randell				\$10.00		
		Contributor address; City; State; Zip Code						
		Plano, TX 75093						
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instruction	<u> </u>				
	Attorney		Self	·)				
_	Date	Full name of contributor Out-of-state PAC (ID			of Contribution (\$)			
	08/27/2024	Full name of contributor out-of-state PAC (ID Johnson, Randell	J#:J	Amount		\$10.00		
	0012112027					Ψ10.00		
		Contributor address; City; State; Zip Code						
		Plano, TX 75093						
	Principal occupation / Job title (See Instructions)		Employer (See Instruction	<u> </u> ;)				
	Attorney		Self	,				
-	-							

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 19/46 Rpt: 37/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	y Republican Party (CEC)		00053162
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/16/2024	Johnson, Timothy		\$40.00
	6 Contributor address; City; State; Zip Code		1
	Lucas, TX 75002		
	pation / Job title (See Instructions)	9 Employer (See Instructions	3)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/02/2024	Kallad, Stephen		\$10.00
	Contributor address; City; State; Zip Code		
	McKinney, TX 75070		
	pation / Job title (See Instructions)	Employer (See Instructions	
Remodeling		None ya	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/18/2024	Kallad, Stephen		\$10.00
	Contributor address; City; State; Zip Code		
	McKinney, TX 75070		
	pation / Job title (See Instructions)	Employer (See Instructions	
Remodeling		None ya	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/18/2024	Kallad, Stephen		\$10.00
	Contributor address; City; State; Zip Code		
	McKinney, TX 75070		
	pation / Job title (See Instructions)	Employer (See Instructions	6)
Remodeling		None ya	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/01/2024	Kemp, David		\$25.00
	Contributor address; City; State; Zip Code		1
	Plano, TX 75024		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Retired		Retired	

The Instruc	ction Guide explains how to c	complete this fo	rm.	1 Total pages Schedule A1: Sch: 20/46 Rpt: 38/103
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
	y Republican Party (CEC)			00053162
4 Date	5 Full name of contributor	ut-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/28/2024	Kemp, David			\$25.00
	6 Contributor address; City; State; Z			1
	Plano, TX 75024			
	pation / Job title (See Instructions)	ę	9 Employer (See Instructions	3)
Retired			Retired	
Date	Full name of contributor 🛛 🗌 οι	ut-of-state PAC (ID#:)	Amount of Contribution (\$)
08/28/2024	Kemp, David			\$25.00
	Contributor address; City; State; Z			
	-			
	Plano, TX 75024			
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	3)
Retired			Retired	
Date	Full name of contributor	ut-of-state PAC (ID#:)	Amount of Contribution (\$)
09/18/2024	Kemp, David			\$260.05
		ip Code		•
		ip 2000		
	Plano, TX 75024			
Principal occu	n pation / Job title (See Instructions)		Employer (See Instructions	<u>۲</u> ۵)
Retired			Retired	
Date	Full name of contributor	ut-of-state PAC (ID#:)	Amount of Contribution (\$)
09/20/2024	Kleiman, Gina		,	\$52.25
				•
	Contributor address, City, State, 2	ip Code		
	Plano, TX 75074			
Principal occu	L pation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u> ٤)
Retired	'		Retired	, ,
Date	Full name of contributor	ut-of-state PAC (ID#:		Amount of Contribution (\$)
07/02/2024	Konkel, Joan		,	\$10.00
0.102.222		in Code		
	Continuation address, City, State, \angle	ip Coue		
	Plano, TX 74074			
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u></u>
retired			retired	') ''
		I		

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 21/46 Rpt: 39/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ty Republican Party (CEC)		00053162
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/14/2024	Konkel, Joan		\$10.0
	6 Contributor address; City; State; Zip Code		1
	Plano, TX 74074		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u>ا</u> ج)
retired		retired	<i>''</i>
Date	Full name of contributor out-of-state PAC (ID#:_	·)	Amount of Contribution (\$)
08/14/2024	Konkel, Joan		\$10.0
	Contributor address; City; State; Zip Code		·
	Plano, TX 74074		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
retired		retired	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/03/2024	Kreitman, Lori		\$90.0
	Contributor address; City; State; Zip Code		1
	Plano, TX 75024	. <u> </u>	
	upation / Job title (See Instructions)	Employer (See Instructions	5)
CPA		self	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/03/2024	Kreitman, Lori		\$90.0
	Contributor address; City; State; Zip Code		1
	Plano, TX 75024		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
CPA		self	"
	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
Date 09/03/2024)	\$90.0
0310012027			
	Contributor address; City; State; Zip Code		
	Plano, TX 75024		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
СРА		self	

The Instruction Guide explains how to complete this form. 1 Total page School 2012 2 FILER NAME Collin County Republican Party (CEC) 3 Filer ID (Ethics Commission Filers) 00053162 4 Date 09/07/2024 5 Fulname of contributor (remer, Karson) 0 actorisate PAC (Dot wyle; TX 75098 7 Amount of Contribution (%) 9 Employer (See Instructions) n/a 7 Amount of Contribution (%) 9 Employer (See Instructions) n/a 0 Date 07/04/2024 Full name of contributor Laverenz, Trery Contributor address; City; State; Zip Code Lucas, TX 75002 9 Employer (See Instructions) n/a Amount of Contribution (%) \$10.69 Principal occupation / Job title (See Instructions) n/a Employer (See Instructions) Retired Amount of Contribution (%) \$10.69 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (%) \$10.69 Date 09/04/2024 Full name of contributor Lucas, TX 75002 Employer (See Instructions) Retired Amount of Contribution (%) \$10.69 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (%) \$10.69 Date 09/04/2024 Full name of contributor Lucas, TX 75002 Employer (See Instructions) Retired Amount of Contribution (%) \$10.69 Date 09/04/2024 Full name of contributor Lucas, TX 75002 Employer (See Instructions) Retired Amount of Contribution (%) L				
Collin County Republican Party (CEC) 00053152 4 Date 5 Full name of contributor out-of-state PAC (IDII:) 90/07/2024 Kremer, Karsson 5 Studing address; City; State; Zip Code 7 8 Principal accupation / Job title (See Instructions) 9 Employer (See Instructions) 7 8 Principal accupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (S) 07/04/2024 Laverenz, Terry Amount of Contribution (S) \$10.69 Contributor address; City; State; Zip Code Retired Amount of Contribution (S) Principal occupation / Job title (See Instructions) Retired Amount of Contribution (S) Principal occupation / Job title (See Instructions) Retired Amount of Contribution (S) OB(04/2024 Full name of contributor out-of-state PAC (Der Amount of Contribution (S) Contributor address; City; State; Zip Code Retired Amount of Contribution (S) Principal occupation / Job title (See Instructions) Retired Amount of Contribution (S) Oate Full name of contributor out-of-state PAC (Der Amount of Contribution (S) Oate Full name of contributor out	The Instru	ction Guide explains how to complete this f	orm.	
Collin County Republican Party (CEC) 00053152 4 Date 5 Full name of contributor out-of-state PAC (IDII:) 90/07/2024 Kremer, Karsson 5 Studing address; City; State; Zip Code 7 8 Principal accupation / Job title (See Instructions) 9 Employer (See Instructions) 7 8 Principal accupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (S) 07/04/2024 Laverenz, Terry Amount of Contribution (S) \$10.69 Contributor address; City; State; Zip Code Retired Amount of Contribution (S) Principal occupation / Job title (See Instructions) Retired Amount of Contribution (S) Principal occupation / Job title (See Instructions) Retired Amount of Contribution (S) OB(04/2024 Full name of contributor out-of-state PAC (Der Amount of Contribution (S) Contributor address; City; State; Zip Code Retired Amount of Contribution (S) Principal occupation / Job title (See Instructions) Retired Amount of Contribution (S) Oate Full name of contributor out-of-state PAC (Der Amount of Contribution (S) Oate Full name of contributor out	2 FILER NAME			
09/07/2024 Kremer, Karson \$10.69 6 Contributior address; City; State; Zip Code wyle, TX 75098 7/a Principal occupation / Job title (See Instructions) n/a Principal occupation / Job title (See Instructions) n/a Anount of Contribution (S) sto.69 Date 07/04/2024 Full name of contributor out-of-state PAC (D# Laverenz, Terry Anount of Contribution (S) sto.69 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (S) sto.69 Date 08/04/2024 Full name of contributor out-of-state PAC (D# Laverenz, Terry Amount of Contribution (S) sto.69 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (S) sto.69 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (S) sto.69 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (S) sto.69 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (S) sto.69 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (S) sto.00 Date 07/18/2024 <td></td> <td>y Republican Party (CEC)</td> <td></td> <td></td>		y Republican Party (CEC)		
6 Contributor address: City: State; Zip Code wylie, TX 75098 8 Principal occupation / Job Itile (See Instructions) n/a 9 Employer (See Instructions) n/a Date 07/04/2024 Full name of contributor out-of-state PAC (Dor:) Laverenz, Terry Amount of Contribution (S) Contribution address; City: State; Zip Code Principal occupation / Job Itile (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (S) Contributor address; City: State; Zip Code Date 08/04/2024 Full name of contributor out-of-state PAC (Der:) Contributor address; City: State; Zip Code Amount of Contribution (S) Contributor address; City: State; Zip Code Principal occupation / Job Itile (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (S) S10.69 Principal occupation / Job Itile (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (S) S10.69 Date 09/04/2024 Full name of contributor out-of-state PAC (Der:) Contributor address; City: State; Zip Code Lucas, TX 75002 Employer (See Instructions) Retired Principal occupation / Job Itile (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (S) S10.69 Date 07/18/2024 Full name of contributor out-of-state PAC (Der:	4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
6 Contributor address; City; State; Zip Code wyle, TX 75098 9 8 Principal occupation / Job title (See Instructions) n/a Date Full name of contributor out-of-state PAC (De:) Laverenz, Terry Amount of Contribution (\$) S10.69 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (\$) S10.69 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (\$) S10.69 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (\$) S10.69 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (\$) S10.69 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (\$) S10.69 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (\$) S10.69 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Amount of Contribution (\$) S10.00 Principal occupation / Job title (See Instructions) Retired Principal occupation / Job title (See Instructions) Retired Amount of Contribution (\$) S10.00 <	09/07/2024			\$10.6
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Plano, TX 75025 Principal occupation / Job title (See Instructions) Employer (See Instructions)	07/18/2024			\$10.0
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Plano, TX 75025		
	Principal occu		Employer (See Instructions	ð
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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 23/46 Rpt: 41/103	
2 FILER NAME			3 Filer ID (Ethics Commission File	rs)
	y Republican Party (CEC)		00053162	13)
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
08/18/2024	Lethe, David		\$	10.00
	6 Contributor address; City; State; Zip Code			
	Plano, TX 75025			
-	pation / Job title (See Instructions)	9 Employer (See Instructions	i)	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/18/2024	Lethe, David		\$	10.00
	Contributor address; City; State; Zip Code			
	Plano, TX 75025			
	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
07/01/2024	Leyrer, Ellen		\$	10.00
	Contributor address; City; State; Zip Code			
	Plana TX 75022			
Dringingloggy	Plano, TX 75023	Employer (Cas Instructions	<u></u>	
Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	•)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	10.00
07/27/2024	Leyrer, Ellen		۵. ۲	10.00
	Contributor address; City; State; Zip Code			
	Plano, TX 75023			
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	l ;)	
Retired		Retired		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/27/2024	Leyrer, Ellen)		10.00
	Contributor address; City; State; Zip Code			
	Plano, TX 75023			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Retired		Retired		

The Instru	iction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 24/46 Rpt: 42/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ty Republican Party (CEC)		00053162
4 Date	5 Full name of contributor out-of-state PAC (ID	D#:)	7 Amount of Contribution (\$)
07/06/2024	Madden, Jerry		\$10.
	6 Contributor address; City; State; Zip Code		1
	Richardson, TX 75080		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u></u>
Retired		Retired	<i>י</i> ן
Date	Full name of contributor Out-of-state PAC (ID	D#:)	Amount of Contribution (\$)
08/06/2024			\$10.
	Richardson, TX 75080		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of Contribution (\$)
09/06/2024			\$10.
	Contributor address; City; State; Zip Code		1
	Richardson, TX 75080		
	upation / Job title (See Instructions)	Employer (See Instructions	;)
Retired		Retired	
Date		D#:)	Amount of Contribution (\$)
08/05/2024			\$105.
	Contributor address; City; State; Zip Code		
	Blue Ridge, TX 75424		
Principal occl	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> \$)
Title Examin	ier	Republic Title	
Date	Full name of contributor out-of-state PAC (ID)	Amount of Contribution (\$)
08/05/2024			\$75.
	Contributor address; City; State; Zip Code		
	Blue Ridge, TX 75424		
	upation / Job title (See Instructions)	Employer (See Instructions	»)
Title Examin	ier	Republic Title	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 25/46 Rpt: 43/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Collin Count	y Republican Party (CEC)		00053162
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/01/2024	McCahon, Ann		\$10.00
	6 Contributor address; City; State; Zip Code		1
	Plano, TX 75026		
	upation / Job title (See Instructions)	9 Employer (See Instructions	3)
IT PROFES	SIONAL Retired	CTR	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/01/2024	McCahon, Ann		\$10.00
	Contributor address; City; State; Zip Code		1
	Plano, TX 75026		
-	upation / Job title (See Instructions)	Employer (See Instructions	3)
IT PROFESS	SIONAL Retired	CTR	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/01/2024	McCahon, Ann		\$10.00
	Contributor address; City; State; Zip Code		1
	Plano, TX 75026		
-	upation / Job title (See Instructions)	Employer (See Instructions	3)
IT PROFES	SIONAL Retired	CTR	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/16/2024	McCoy, Lynn		\$10.72
	Contributor address; City; State; Zip Code		1
	Plano, TX 75023		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Retired		Retired	"
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
08/16/2024	Full name of contributor out-of-state PAC (ID#: McCoy, Lynn	/	\$10.72
00/10/2024			· · · · · · · · · · · · · · · · · · ·
	Contributor address; City; State; Zip Code		
	Plano, TX 75023		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
Retired		Retired	<i>"</i>

т	he Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 26/46 Rpt: 44/103	
2 F	ILER NAME				3	Filer ID (Ethics Commission	n Filers)
		y Republican Party (CEC)				00053162	
4 D	ate	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
0	9/16/2024	McCoy, Lynn					\$10.72
		6 Contributor address; City; State					
		Plano, TX 75023					
8 P	rincipal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
R	etired			Retired			
D	ate	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	8/30/2024	McFarland, Paul		/		(1)	\$120.00
		Contributor address; City; State					+0.00
		Contributor address, City, State	2, Zip Couc				
		Plano, TX 75074					
P	rincipal occu	L pation / Job title (See Instructions)		Employer (See Instructions	1 5)		
	etired	· · · · · · · · · · · · · · · · · · ·		Retired	,		
	ate	Full name of contributor)	Γ	Amount of Contribution (\$)	
	ale 9/16/2024	Meiberg, A.S.	_ OUL-OI-SLALE PAC (ID#)			\$25.00
	5/10/2024		y Zin Codo				Ψ20.00
		Contributor address; City; State	e, Zip Code				
		Plano, TX 75023					
P	rincipal occu	pation / Job title (See Instructions)		Employer (See Instructions	 5)		
	etired	· · · · · · · · · · · · · · · · · · ·		retired	,		
	ate	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	9/21/2024	Meyers, Karen)			\$52.25
	5/21/2024						<i>QOL.LO</i>
		Contributor address, City, State	e, Zip Code				
		Plano, TX 75075					
P	rincipal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
E	ducator			Retired			
D	ate	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	8/05/2024	Midgely, James					\$40.00
	0/00/2024		o: Zin Codo				φ-10.00
		Contributor address; City; State	e, zip code				
		Plano, TX 75075					
P	rincipal occu	pation / Job title (See Instructions)		Employer (See Instructions	1 5)		
	etired			retired	-)		

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 27/46 Rpt: 45/103
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Collin County Republican Party (CEC)	00053162
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
08/05/2024 Midgely, James	\$10.00
6 Contributor address; City; State; Zip Code	
Plano, TX 75075	-
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) retired retired)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/05/2024 Midgley, Denise	\$10.00
Contributor address; City; State; Zip Code	
Plano, TX 75075	
Principal occupation / Job title (See Instructions) Employer (See Instructions))
Homemaker Homemaker	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/10/2024 Milner, David	\$26.27
Contributor address; City; State; Zip Code	
Frisco, TX 75035	
Principal occupation / Job title (See Instructions) Employer (See Instructions))
Retired Retired	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/10/2024 Milner, David	\$26.27
Contributor address; City; State; Zip Code	
Frisco, TX 75035	
Principal occupation / Job title (See Instructions) Employer (See Instructions))
Retired Retired	,
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/01/2024 Moffatt, Michel	\$10.00
Contributor address; City; State; Zip Code	
Contributor address, City, State, Zip Code	
Celina, TX 75009	
Principal occupation / Job title (See Instructions) Employer (See Instructions))
Coach and Engineer Unemployed	

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The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 28/46 Rpt: 46/103	
2 FILER NAME			3 Filer ID (Ethics Commission F	-ilers)
	ty Republican Party (CEC)		00053162	,
4 Date	5 Full name of contributor out-of-state PAC (ID#	t)	7 Amount of Contribution (\$)	
08/01/2024	Moffatt, Michel			\$10.00
	6 Contributor address; City; State; Zip Code			
0 Dringing oog	Celina, TX 75009	C Employer (See Instructions)	Λ	
Coach and E	upation / Job title (See Instructions) Engineer	9 Employer (See Instructions) Unemployed)	
	-			
Date		:)	Amount of Contribution (\$)	\$10.00
09/01/2024				\$10.00
	Contributor address; City; State; Zip Code			
	Celina, TX 75009			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Coach and E		Unemployed		
Date	-	:)	Amount of Contribution (\$)	
07/19/2024	Morris, Michael	·/		\$100.00
01,10,202	Contributor address; City; State; Zip Code			Ψ 1 00.00
	Dallas, TX 75287			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
retired		retired		
Date	Full name of contributor out-of-state PAC (ID#)	Amount of Contribution (\$)	
07/23/2024	Murphy, Matt			\$10.69
	Contributor address; City; State; Zip Code			
	Prosper, TX 75078			
-	upation / Job title (See Instructions)	Employer (See Instructions)		
President		Wunderbar Ventures LLC		
Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)	
08/23/2024	Murphy, Matt			\$10.69
	Contributor address; City; State; Zip Code			
	Prosper, TX 75078			
Drincinal occu		Employer (See Instructions)	Λ	
Principal occu President	upation / Job title (See Instructions)	Employer (See Instructions) Wunderbar Ventures LLC		
FICSIGETI				

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The Instrue	ction Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 29/46 Rpt: 47/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	y Republican Party (CEC)		00053162
4 Date	5 Full name of contributor 🔲 out-of-state PA	AC (ID#:)	7 Amount of Contribution (\$)
09/23/2024	Murphy, Matt		\$10.69
	6 Contributor address; City; State; Zip Code		
	Prosper, TX 75078		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	us)
President		Wunderbar Ventures L	LC
Date	Full name of contributor Out-of-state PA	AC (ID#:)	Amount of Contribution (\$)
07/02/2024	Nored, Lynn		\$10.00
011021202-4			Ψ10.00
	Contributor address; City; State; Zip Code		
	McKinney, TX 75071		
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	us)
retired		retired	
Date	Full name of contributor out-of-state PA	AC (ID#:)	Amount of Contribution (\$)
07/27/2024	Nored, Lynn	AC (ID#)	\$10.00
0112112024	-		φτ0.00
	Contributor address; City; State; Zip Code		
	McKinney, TX 75071		
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	us)
retired		retired	
Date	Full name of contributor	AC (ID#:)	Amount of Contribution (\$)
08/27/2024	Nored, Lynn	,	\$10.00
0012112027	-		
	Contributor address; City; State; Zip Code		
	McKinney, TX 75071		
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	is)
retired		retired	
Date	Full name of contributor out-of-state PA		Amount of Contribution (\$)
08/30/2024	Ozmun, Janie		\$60.00
00/00/202 .			
	Contributor address; City; State; Zip Code		
	Allen, TX 75013		
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	is)
retired		retired	

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 30/46 Rpt: 48/103	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		ty Republican Party (CEC)			00053162	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/02/2024	Padgett, Hayden				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Plano, TX 75025				
		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Product Man	lager	TaxAct			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	07/18/2024	Padgett, Hayden				\$10.00
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75025				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Product Man	lager	TaxAct			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/18/2024	Padgett, Hayden				\$10.00
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75025				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Product Man	lager	TaxAct			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	07/19/2024	Pangborn, Joel				\$100.00
		Contributor address; City; State; Zip Code]		
\vdash	Dringing opp	Aubrey, TX 76227		- \		
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Salesman		Costco	-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/15/2024	Parks, Michael				\$156.15
		Contributor address; City; State; Zip Code				
		Diana TV 75022				
	Dringing oog	Plano, TX 75023		<u> </u>		
		upation / Job title (See Instructions)	Employer (See Instructions Southwest Airlines	5)		
	Supervisor		Southwest Allines			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 31/46 Rpt: 49/103	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Collin County Republican Party (CEC)				00053162	,
4	Date	Date 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	
	07/02/2024	Patel, Pinalkumar				\$10.00
		6 Contributor address; City; State; Zip Code				
		Allen, TX 75002				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	Advisory		Shiva Ram LLC	0)		
	Date	Full name of contributor Out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	07/09/2024	Patel, Pinalkumar				\$10.00
		Contributor address; City; State; Zip Code				
		Allen, TX 75002				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Advisory		Shiva Ram LLC			
	Date	Full name of contributor 🔲 out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/09/2024	Patel, Pinalkumar				\$10.00
		Contributor address; City; State; Zip Code		1		
		Allen, TX 75002				
	Bringinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>।</u>		
	Advisory		Shiva Ram LLC	5)		
					Amount of Contribution (f)	
	Date 07/19/2024	Full name of contributor out-of-state PAC (ID#: Paulson, John)		Amount of Contribution (\$)	\$125.00
	07/19/2024					φ125.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75074				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	08/05/2024	Paulson, John				\$25.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75074				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 32/46 Rpt: 50/103	
2 FILER NAME			3 Filer ID (Ethics Commission	n Filers)
	ty Republican Party (CEC)		00053162	
4 Date	Date 5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$)	
07/11/2024	REYNOLDS, JOE			\$10.00
	6 Contributor address; City; State; Zip Code			
	ALLEN, TX 75002			
8 Principal occu Director	upation / Job title (See Instructions)	9 Employer (See Instructions NUU	3)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/11/2024	REYNOLDS, JOE			\$10.00
	Contributor address, City, State, Zip Code			
	ALLEN, TX 75002			
			<u> </u>	
	upation / Job title (See Instructions)	Employer (See Instructions	5)	
Director		NUU		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/11/2024	REYNOLDS, JOE			\$10.00
	Contributor address; City; State; Zip Code			
	ALLEN, TX 75002			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	; ;)	
Director		NUU		
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (f)	
08/12/2024)	Amount of Contribution (\$)	¢104.00
08/12/2024	Raley, Lori			\$124.98
	Contributor address; City; State; Zip Code			
	Plano, TX 75024			
-	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Jewelry Des	signer	Self		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/12/2024	Raley, Lori			\$124.98
	Contributor address; City; State; Zip Code			
	Plano, TX 75024			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions) ;)	
Jewelry Des		Self	<i>''</i>	

	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 33/46 Rpt: 51/103		
2	FILER NAME		3	Filer ID (Ethics Commission	n Filers)	
	Collin Count	y Republican Party (CEC)			00053162	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/02/2024	Ramsey, Clay				\$10.00
	I	6 Contributor address; City; State; Zip Code				
		1				
		Plano, TX 75075				
8			9 Employer (See Instructions	;)		
	Information S	Security	HMS Inc			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	07/26/2024	Ramsey, Clay				\$10.00
	1	Contributor address; City; State; Zip Code				
		l				
		l				
		Plano, TX 75075		L		
	•	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Information S	Security	HMS Inc			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/26/2024	Ramsey, Clay				\$10.00
	I	Contributor address; City; State; Zip Code				
		l				
L		Plano, TX 75075				
		pation / Job title (See Instructions)	Employer (See Instructions	;)		
L	Information S	-	HMS Inc	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	_
	09/05/2024	Rawe, Janet				\$40.00
		Contributor address; City; State; Zip Code				
		1				
		DI				
┢	Duin singl oppi	Plano, TX 75074	Englisher (Cas Instructions	ŕ		
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	;)		
╘				—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷=00.00
	08/05/2024	Republican Club at Heritage Ranch				\$500.00
		Contributor address; City; State; Zip Code				
		1				
		Fairview, TX 75069				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Ρπιτιραί στου			9		
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The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 34/46 Rpt: 52/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ty Republican Party (CEC)	00053162	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/20/2024			\$120.00
	6 Contributor address; City; State; Zip Code		1
	Plano, TX 75093		
	upation / Job title (See Instructions)	9 Employer (See Instructions	\$)
Executive		PepsiCo	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/19/2024	Richardson, Keresa		\$150.00
	Contributor address; City; State; Zip Code		1
	McKinney, TX 75070		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)
CEO		Lawton Group	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/01/2024	Riley, Nannette		\$10.5
	Contributor address; City; State; Zip Code		1
	Allen, TX 75002		
-	upation / Job title (See Instructions)	Employer (See Instructions	3)
CFO		DoctorLogic	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/28/2024	Riley, Nannette		\$10.59
	Contributor address; City; State; Zip Code		1
	Allen, TX 75002	1	<u> </u>
-	pation / Job title (See Instructions)	Employer (See Instructions	\$)
CFO		DoctorLogic	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/28/2024	Riley, Nannette		\$10.59
	Contributor address; City; State; Zip Code]
	Allen, TX 75002	1	<u> </u>
	ipation / Job title (See Instructions)	Employer (See Instructions	š)
CFO		DoctorLogic	

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 35/46 Rpt: 53/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	y Republican Party (CEC)	00053162	
4 Date	Date 5 Full name of contributor Image: out-of-state PAC (ID#:)		7 Amount of Contribution (\$)
09/16/2024	09/16/2024 Rively, Mary		\$20.0
	6 Contributor address; City; State; Zip Code		
	Plano, TX 75075		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)
retired		retired	
Date	Full name of contributor Out-of-state PAC (ID#:_)	Amount of Contribution (\$)
08/30/2024	Rodriguez, Jesse		\$60.0
	Contributor address; City; State; Zip Code		
	Plano, TX 75074		
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 (\$)
09/07/2024	Rodriguez, Marco		\$10.6
	Contributor address; City; State; Zip Code		
	Neveda, TX 75173	i	
	pation / Job title (See Instructions)	Employer (See Instructions	3)
retired		retired	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/02/2024	Rovner, ivan		\$10.0
	Contributor address; City; State; Zip Code		
	PLANO, TX 75025		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
physician		self	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/16/2024	Rovner, ivan		\$10.0
	Contributor address; City; State; Zip Code		
	PLANO, TX 75025		
	pation / Job title (See Instructions)	Employer (See Instructions	
physician		self	

The Instru	iction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 36/46 Rpt: 54/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ty Republican Party (CEC)		00053162
4 Date	5 Full name of contributor out-of-state PAC (ID	D#:)	7 Amount of Contribution (\$)
08/16/2024			\$10.
	6 Contributor address; City; State; Zip Code		
0 Dringing oog	PLANO, TX 75025	Content (Soc Instruction	
8 Principal occu physician	upation / Job title (See Instructions)	9 Employer (See Instructions self	S)
Date		D#:)	Amount of Contribution (\$)
07/25/2024			
	Contributor address; City; State; Zip Code		
	Plano, TX 75093		
Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	S)
Real Estate		Self	
Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of Contribution (\$)
08/25/2024		Rudd, Daniel	
	Contributor address; City; State; Zip Code		
	Plano, TX 75093	<u> </u>	
	upation / Job title (See Instructions)	Employer (See Instructions	s)
Real Estate		Self	· · · · · · · · · · · · · · · · · · ·
Date		D#:)	Amount of Contribution (\$)
07/02/2024	Rumfield, Mike		\$10.
	Contributor address; City; State; Zip Code		
	McKinney, TX 75071		
Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	s)
Chief Deput		Collin County Governm	ient
Date	Full name of contributor out-of-state PAC (ID		Amount of Contribution (\$)
07/21/2024	Rumfield, Mike		\$10.
	Contributor address; City; State; Zip Code		
	McKinney, TX 75071		
	upation / Job title (See Instructions)	Employer (See Instruction	
Chief Deput	У	Collin County Governm	ient

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 37/46 Rpt: 55/103	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Collin County Republican Party (CEC)				00053162	,
4	Date	5 Full name of contributor Dut-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	08/21/2024	Rumfield, Mike				\$10.00
		6 Contributor address; City; State; Zip Code		"		
		Makingan TV 75071				
	Dringinglassy	McKinney, TX 75071				
8	Chief Deputy	pation / Job title (See Instructions)	9 Employer (See Instructions Collin County Governme			
	Date)		Amount of Contribution (\$)	
	07/05/2024	Rutter, Adam				\$520.83
		Contributor address; City; State; Zip Code				
		Eriana TX ZEO2E				
	Deine in all a sec	Frisco, TX 75035	Frankriger (Oser hastmatism			
	Businessma	pation / Job title (See Instructions)	Employer (See Instructions Ericsson Inc	s)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/01/2024	Schwerin, Michael				\$10.00
		Contributor address; City; State; Zip Code				
⊢	Dringinglassy	Wylie, TX 75098	Freedower (Coo leastructions			
	Nonprofit Fu	pation / Job title (See Instructions)	Employer (See Instructions Self	S)		
	-					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	† 10.00
	07/28/2024	Schwerin, Michael				\$10.00
		Contributor address; City; State; Zip Code				
		Wylie, TX 75098				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>।</u> ९)		
	Nonprofit Fu		Self	5)		
⊨				<u> </u>	Amount of Contribution (ft)	
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#: Schwerin, Michael)		Amount of Contribution (\$)	\$10.00
	00/20/2024					\$10.00
	Contributor address; City; State; Zip Code					
		Wylie, TX 75098				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Nonprofit Fu		Self	-,		
⊢						

			1 Total pages Schedule A1:
The Instru	ction Guide explains how to complete this f	orm.	Sch: 38/46 Rpt: 56/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Collin Count	y Republican Party (CEC)		00053162
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
07/01/2024	Semanek, Daniel		\$10.00
	6 Contributor address; City; State; Zip Code		
	Allen, TX 75002		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ;)
Attorney		Legal Aid	,
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/28/2024	Semanek, Daniel		\$10.00
	Contributor address; City; State; Zip Code		
	Allen, TX 75002		
	pation / Job title (See Instructions)	Employer (See Instructions	3)
Attorney		Legal Aid	r
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/28/2024	Semanek, Daniel		\$10.00
	Contributor address; City; State; Zip Code		
	Allen, TX 75002		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)
Attorney		Legal Aid	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/01/2024	Simmons, Floyd		\$10.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75074		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	 ;)
Retired		Retired	,
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/27/2024	Simmons, Floyd		\$10.00
	Contributor address; City; State; Zip Code		
Drivet	Plano, TX 75074	Freelower (Contraction of	
Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)
		Relieu	

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 39/46 Rpt: 57/103	
2 FILER NAME		3 Filer ID (Ethics Commission Filers	5)	
	y Republican Party (CEC)	00053162	"	
4 Date	Date 5 Full name of contributor Image: out-of-state PAC (ID#:)		7 Amount of Contribution (\$)	
08/27/2024			\$10	.0.00
	6 Contributor address; City; State; Zip Code			
	Plano, TX 75074			
8 Principal occu Retired	ipation / Job title (See Instructions)	9 Employer (See Instructions Retired	;)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/01/2024	Simon-Roberts, Laurel		\$26	6.27
	Contributor address; City; State; Zip Code			
	Plano, TX 75023			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/28/2024	Simon-Roberts, Laurel		\$26	6.27
	Contributor address; City; State; Zip Code			
	Plano, TX 75023			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/28/2024	Simon-Roberts, Laurel		.,	6.27
	Contributor address; City; State; Zip Code			
	Plano, TX 75023			
Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	;)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/10/2024	Smith, Carol			0.00
	Contributor address; City; State; Zip Code			
	Frisco, TX 75034			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	۲ ۵)	
retired		retired		
		<u> </u>		

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 40/46 Rpt: 58/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ty Republican Party (CEC)		00053162
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/02/2024	07/02/2024 Steele, Marilyn Byron		\$20.20
	6 Contributor address; City; State; Zip Code		1
	Allen, TX 75013	1	<u> </u>
	upation / Job title (See Instructions)	9 Employer (See Instructions	3)
Retired		Retired	
Date)	Amount of Contribution (\$)
07/07/2024	Steele, Marilyn Byron		\$20.20
	Contributor address; City; State; Zip Code]
<u> </u>	Allen, TX 75013	1	
-	upation / Job title (See Instructions)	Employer (See Instructions	5)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/07/2024	Steele, Marilyn Byron		\$20.20
	Contributor address; City; State; Zip Code		
	Allen TV 75010		
Dringing oog	Allen, TX 75013		
Retired	upation / Job title (See Instructions)	Employer (See Instructions Retired	5)
	<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/21/2024	Thorsen, Matt		\$26.33
	Contributor address; City; State; Zip Code		
	Allen, TX 75002		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	e)
Owner		The Dallas Shutter Com	,
	Full name of contributor Out-of-state PAC (ID#:		
Date 08/21/2024	Full name of contributor out-of-state PAC (ID#: Thorsen, Matt)	Amount of Contribution (\$) \$26.33
0012112024			ψ20.00
	Contributor address; City; State; Zip Code		
	Allen, TX 75002		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>
Owner		The Dallas Shutter Com	

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 41/46 Rpt: 59/103
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ty Republican Party (CEC)		00053162
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/23/2024	Thorsen, Matt		\$26.33
	6 Contributor address; City; State; Zip Code		
5 B1 indian	Allen, TX 75002		<u></u>
	upation / Job title (See Instructions)	9 Employer (See Instructions) The Dallas Shutter Com	
Owner		The Dallas Shutter Com	-
Date	_)	Amount of Contribution (\$)
09/07/2024			\$26.27
	Contributor address; City; State; Zip Code		
Duin single age	Plano, TX 75023		<u> </u>
	upation / Job title (See Instructions)	Employer (See Instructions) Retired)
Retired		<u> </u>	
Date)	Amount of Contribution (\$)
09/16/2024	Tittle, Carl		\$10.6
	Contributor address; City; State; Zip Code		
	Plano, TX 75023		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	
Retired		Retired)
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/07/2024	Tu, Maria		\$50.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75025		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	(
Attorney		Law Offices of Maria Tu	
	Full name of contributor Out-of-state PAC (ID#:		
Date 08/07/2024	Full name of contributor out-of-state PAC (ID#: Tu, Maria)	Amount of Contribution (\$) \$50.00
0010112024			ψου.υυ
	Contributor address; City; State; Zip Code		
	Plano, TX 75025		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> ;)
Attorney		Law Offices of Maria Tu	

T	he Instru	ction Guide explains how	v to complete this f	form.	1	Total pages Schedule A1: Sch: 42/46 Rpt: 60/103	
2 FI						Filer ID (Ethics Commission	Filers)
		y Republican Party (CEC)			ľ	00053162	T licity
4 Dá	ate	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
09	9/07/2024	Tu, Maria					\$50.00
		6 Contributor address; City; S	State; Zip Code		"		
		Plano, TX 75025					
8 Pr	rincipal occu	pation / Job title (See Instructions	s)	9 Employer (See Instructions			
A	ttorney			Law Offices of Maria Tu	ג 		
Dá	ate	Full name of contributor	out-of-state PAC (ID#:_	<u> </u>	Τ	Amount of Contribution (\$)	
07	7/01/2024	Waitte, Robert					\$25.00
		Contributor address; City; S			·		
			· ·				
		Plano, TX 75024					
Pr	rincipal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	s)		
В	usiness ow	ner		Commercial Real estate	e Ac	lvisors	
Dá	ate	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	7/01/2024	Warren, Tammy	► · · ·				\$10.00
			State: Zip Code	,	·		
		McKinney, TX 75070					
Pr	rincipal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>-</u> s)		
E	xecutive As	sistant		Emerson			
Da	ate	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	7/27/2024	Warren, Tammy					\$10.00
					·		Ŧ -
			late, Zip Couc				
		McKinney, TX 75070					
Pr	rincipal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u>		
E	xecutive As	sistant		Emerson			
Da	ate	Full name of contributor	out-of-state PAC (ID#:_)	Τ	Amount of Contribution (\$)	
	8/27/2024	Warren, Tammy					\$10.00
			State [.] Zin Code		·		·
		McKinney, TX 75070					
Pr	rincipal occu	pation / Job title (See Instructions	<u></u>	Employer (See Instructions	L s)		
	xecutive As		<i>'</i>)	Emerson	2,		

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 43/46 Rpt: 61/103	
2	FILER NAME		3	Filer ID (Ethics Commission	Filers)	
	Collin Count	y Republican Party (CEC)		00053162		
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/02/2024	Webb, Duncan				\$10.00
	I	6 Contributor address; City; State; Zip Code		1		
Ļ	Dringing occu	PLANO, TX 75093	9 Employer (See Instructions	<u> </u>		
δ	Principal occu Commission		9 Employer (See Instructions Collin	5)		
╞				.		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢10.00
	07/10/2024			ļ		\$10.00
		Contributor address; City; State; Zip Code				
		PLANO, TX 75093				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	 5)		
	Commission		Collin	-,		
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/10/2024	Webb, Duncan			Amount of Contraction (1)	\$10.00
	00.22	Contributor address; City; State; Zip Code		ł		* = -
		PLANO, TX 75093				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Commission	er	Collin			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/12/2024	Webb, Virginia				\$26.27
	I	Contributor address; City; State; Zip Code		1		
L	- · · ·	Frisco, TX 75034		<u> </u>		
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
L	Retired		Retired	-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/02/2024	Whitt, Maggie				\$10.00
		Contributor address; City; State; Zip Code				
		Murphy, TX 75094				
\vdash	Dringing occu		Employer (See Instructions	<u> </u>		
	Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
\vdash	Retireu					

The Instruc	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 44/46 Rpt: 62/103	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	y Republican Party (CEC)	00053162		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
08/02/2024	Whitt, Maggie		\$	\$10.00
	6 Contributor address; City; State; Zip Code			
	Murphy, TX 75094			
	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
Retired		Retired		
Date	— —	:)	Amount of Contribution (\$)	
09/02/2024	Whitt, Maggie		\$	\$10.00
	Contributor address; City; State; Zip Code			
	Murphy, TX 75094	_		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:	· :)	Amount of Contribution (\$)	
07/01/2024	Wilbur, Kirby		\$	\$10.00
	Contributor address; City; State; Zip Code			
	McKinney, TX 75071			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;) ;)	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:	<u>.</u>)	Amount of Contribution (\$)	
07/27/2024	Wilbur, Kirby		\$	\$10.00
	Contributor address; City; State; Zip Code			
	McKinney, TX 75071			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:	<u>.</u>)	Amount of Contribution (\$)	
08/27/2024	Wilbur, Kirby		\$	\$10.00
	Contributor address; City; State; Zip Code			
	McKinney, TX 75071			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Retired		Retired		

)			
The Instru	ction Guide explains how to complete t	his form.	1 Total pages Schedule A1: Sch: 45/46 Rpt: 63/103
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
	ty Republican Party (CEC)	00053162	
4 Date	5 Full name of contributor out-of-state PAC	: (ID#:)	7 Amount of Contribution (\$)
09/05/2024	Will, Brian		\$45.00
	6 Contributor address; City; State; Zip Code		···
	Plano, TX 75025	<u> </u>	
-	upation / Job title (See Instructions)	9 Employer (See Instruction	IS)
Retired		Retired	
Date	—	: (ID#:)	Amount of Contribution (\$)
09/23/2024	Winkel, Amy		\$120.00
	Contributor address; City; State; Zip Code		
	McKinney, TX 75072	- I	
	upation / Job title (See Instructions)	Employer (See Instruction	IS)
Retired		Retired	
Date	—	: (ID#:)	Amount of Contribution (\$)
07/01/2024	Woppman, Glenn		\$25.00
	Contributor address; City; State; Zip Code		
	Plano, TX 75093	<u> </u>	
	upation / Job title (See Instructions)	Employer (See Instruction	IS)
Software Bu	siness Mgr	ASSET InterTech	
Date		: (ID#:)	Amount of Contribution (\$)
08/01/2024	Woppman, Glenn		\$25.00
	Contributor address; City; State; Zip Code		
	Diana TV 75002		
Dringing ago	Plano, TX 75093	Employer (Coo Instruction	<u> </u>
-	upation / Job title (See Instructions)	Employer (See Instruction ASSET InterTech	IS)
Software Bu			
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of Contribution (\$)
09/01/2024	Woppman, Glenn	\$25.00	
	Contributor address; City; State; Zip Code		
	Plano, TX 75093		
-	upation / Job title (See Instructions)	Employer (See Instruction	IS)
Software Bu	siness Mgr	ASSET InterTech	
1			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 **1** Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 46/46 Rpt: 64/103 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Collin County Republican Party (CEC) 00053162 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 08/01/2024 \$100.00 eeg immigration law firm 6 Contributor address; City; State; Zip Code Frisco, TX 75035 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)

LOANS		SCHEDUL	_E E
The Instruction Guide explains how to complete this form.	ges Schedule E: 1 Rpt: 65/103		
2 FILER NAME Collin County Republican Party (CEC)	(Ethics Commission I L62	-ilers)	
⁴ TOTAL OF UNITEMIZED LOANS		\$	0.00
5 Date of loan 7 Name of lender Out-of-state PAC (ID#:)	9 Loan Amount (\$)	
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		10 Interest Rate	
		11 Maturity Date	
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions))		
14 Description of Collateral 15 Check if personal funds we None	re deposited	l into political account (See Instructions)	
16 GUARANTOR INFORMATION 17 Name of guarantor		19 Amount Guarantee	ed (\$)
not applicable 18 Guarantor address; City; State; Zip Code			
20 Principal occupation 21 Employer (See Instructions))	1	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Poling Expense al Committee 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:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 1/37 Rpt: 66/103		Collin County Republican Party	(CEC)				00053162	
4	Date	5	Payee name				I		-
	07/17/2024		Amazon						
6	Amount (\$)	7	Payee address; City;	State;	Zip Coc	e			
	\$196.03	<u>،</u>	410 Terry Ave. North						
			Seattle, WA 98109						
8	PURPOSE OF		Category (See Categories listed at the top		edule)	b) Description			
	EXPENDITURE	(Office Overhead/Rental Expens	e				ide of Texas. Complete Schedule T. , officeholder living expense	
						office supplie			
							-		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Of	ffice soug	ht		Office held	_
	Date		^D ayee name						
07/17/2024 Amazon									
	Amount (\$)		Payee address; City;	State;	Zip Coc	e			
	\$77.84		410 Terry Ave. North						
		:	Seattle, WA 98109						
	PURPOSE OF	(a) (Category (See Categories listed at the top	of this schee	edule)	b) Description			
	EXPENDITURE	(Office Overhead/Rental Expens	e				ide of Texas. Complete Schedule T. , officeholder living expense	
						office supplie			
							-		
_	Complete ONLY if direct	L C	andidate/Officeholder name	Of	ffice soug	ht		Office held	—
	expenditure to benefit C/OI								
⊨	Date		Payee name						-
	08/26/2024	I	Amazon						
	Amount (\$)		Payee address; City;	State [.]	Zip Coc	٩			\neg
	\$65.20		410 Terry Ave. North	Olule,	210 000	0			
	400.20		10 reny /we. North						
	Seattle, WA 98109								
	PURPOSE OF		Category (See Categories listed at the top		dule)	b) Description	01.15-	ide of Texas. Complete Schedule T.	
	EXPENDITURE	(Office Overhead/Rental Expens	e				, officeholder living expense	
						office supplie			
	Complete ONLY if direct	C	andidate/Officeholder name	Of	ffice soug	ht		Office held	\dashv
	expenditure to benefit C/OI	н			Ū				
									\neg

	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 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:	FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 2/37 Rpt: 67/103	Collin County Republican Party (CEC)	00053162					
4	Date 09/19/2024	Payee name Amazon						
6	6 Amount (\$) \$17.25 7 Payee address; City; State; Zip Code \$17.25 5 Seattle, WA 98109							
8	PURPOSE OF EXPENDITURE	outside of Texas. Complete Schedule T. , TX, officeholder living expense 2 S						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/19/2024	Amazon						
	Amount (\$) \$168.60	Payee address; City; State; Zip Code 410 Terry Ave. North Seattle, WA 98109						
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	outside 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						
	07/15/2024	Anedot						
Amount (\$) Payee address; City; State; Zip Code \$40.58 PO Box 84314								
		Baton Rouge, LA 70884						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense ES					
	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	-	xpense P prials Expense P	oan Repayment/Re ffice Overhead/Rer olling Expense rinting Expense alaries/Wages/Con w to complete tl	ntal Expense tract Labor	Travel in District Travel Out of Dist	uipment & Related Expense	
1	Total pages Schedule F1:	ILER NAME			3	Filer ID	(Ethics Commission Filers)	
	Sch: 3/37 Rpt: 68/103	collin County Republica	n Party (CEC)			00053162	``````````````````````````````````````	
4	Date 08/15/2024	5 Payee name Anedot						
6	Amount (\$) \$45.56	ayee address; City; O Box 84314 aton Rouge, LA 70884		Zip Code				
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card fees								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder nam	e Offi	ce sought		Office he	d	
	Date	ayee name						
	09/04/2024	nedot						
	Amount (\$) \$45.56	ayee address; City; O Box 84314	State; Z	Zip Code				
	PURPOSE OF EXPENDITURE	aton Rouge, LA 70884 ategory (See Categories liste olicitation/Fundraising	d at the top of this schedu			tside of Texas. Comp X, officeholder living		
					edit card fees			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder nam	e Offi	ce sought		Office he	d	
	Date	ayee name						
	08/26/2024	tmos Energy						
	Amount (\$) \$53.53	ayee address; City; 430 LBJ Freeway	State; Z	Zip Code				
		allas, TX 75240		i				
	PURPOSE OF EXPENDITURE	ategory (See Categories liste office Overhead/Rental				tside of Texas. Comp X, officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder nam	e Offi	ce sought		Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense					
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 4/37 Rpt: 69/103		Collin County Republican Party (CEC)				00053162		
4	Date 08/26/2024		Payee name Atmos Energy						
6	Amount (\$) \$53.54		Payee address; City; State; 5430 LBJ Freeway Dallas, TX 75240	Zip Cod	e				
8 PURPOSE (a 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 Gas utility 						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Off	fice soug	ht		Office held		
	Date		Payee name						
	09/19/2024		Atmos Energy						
	Amount (\$) \$53.44		Payee address; City; State; 5430 LBJ Freeway	Zip Cod	e				
			Dallas, TX 75240						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sched Office Overhead/Rental Expense	dule) (de of Texas. Complete Schedule T. officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name Off	fice soug	ht		Office held		
	Date		Payee name						
	09/19/2024		Babb, Lisa						
	Amount (\$) \$111.43		Payee address; City; State; 8425 Catskill Ct.	Zip Cod	e				
			Plano, TX 75025						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sched Office Overhead/Rental Expense	dule) (, тх,	de of Texas. Complete Schedule T. officeholder living expense fice expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name Off	fice soug	ht		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 Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense - Gift/Awards/Memorials Expense Printing 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:	2	· · · · ·			2	Filer ID (Ethics Commission Filers)			
	Sch: 5/37 Rpt: 70/103	2	Collin County Republican Party (CEC)				00053162			
4	Date	5	Payee name							
	09/19/2024		Bingham Design							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le					
	\$41.60		606 Hanover Court							
			Allen, TX 75023							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	dule)	(b) Description					
	OF	Ľ	Advertising Expense	edule)		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE						, officeholder living expense			
					design assist	and	ce			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	Jht		Office held			
	Date		Payee name							
	07/17/2024		Blue Ribbons Trophies							
	Amount (\$)	Payee address; City; State;	Zip Co	le						
	\$161.08		2915 W 15th Street							
			Plano, TX 75075							
PURPOSE OF EXPENDITURE		(a)	Category (See Categories listed at the top of this sche Office Overhead/Rental Expense	edule)			ide of Texas. Complete Schedule T. , officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H					Office held			
	Date		Payee name							
	08/26/2024		Blue Ribbons Trophies							
-	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$48.51		2915 W 15th Street							
			Plano, TX 75075							
	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			
Complete <u>ONLY</u> if direct expenditure to benefit C/C			Candidate/Officeholder name O	ffice sou	Jht		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 Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)					
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)					
1	Sch: 6/37 Rpt: 71/103	Collin County Republican Party (CEC)	00053162					
4	Date 09/19/2024	Payee name Blue Ribbons Trophies						
_		-						
6 Amount (\$) 7 Payee address; City; State; Zip Code \$6.93 2915 W 15th Street								
_		Plano, TX 75075						
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if ravel outside of Texas. Complete Sch Check if Austin, TX, officeholder living expense name tags								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/19/2024	Blue Ribbons Trophies						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$20.79	2915 W 15th Street Plano, TX 75075						
	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					
	Date	Payee name						
	08/26/2024	CNA Insurance						
	Amount (\$) \$712.82							
		Richardson, TX 75082						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	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								Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2 F				·	3	Filer ID	(Ethics Commission Filers)	
-	Sch: 7/37 Rpt: 72/103		ollin County Republican	Party (CEC)				00053162	()	
4	Date 07/17/2024		ayee name ity of Wylie							
6 Amount (\$) \$57.60 \$57.60 Wylie, TX 75098 7 Payee address; City; State; Zip Code 300 Country Club Rd. Wylie, TX 75098										
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 utility expense 							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office soug	ht		Office he	ld	
	Date	Pa	ayee name							
	07/17/2024	С	ollin College							
	Amount (\$)Payee address;City;State;Zip Code\$3,389.444800 Preston Park Boulevard									
		Ρ	ano, TX 75093							
	PURPOSE OF EXPENDITURE		ategory (See Categories listed vent Expense	at the top of this sch	edule)		n, TX,	de of Texas. Comp officeholder living ENUE		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	С	Office soug	ht		Office he	ld	
	Date	P	ayee name							
	07/17/2024	С	ollin College							
	Amount (\$) \$83.20	Payee address; City; State; Zip Code 4800 Preston Park Boulevard								
			ano, TX 75093		I.					
	PURPOSE OF EXPENDITURE		ategory (See Categories listed vent Expense	at the top of this sch	edule)		ı, TX,	de of Texas. Comp officeholder living UE		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office soug	ht		Office he	ld	

		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: 8/37 Rpt: 73/103	Collin County Republican Party (CEC)	00053162
4	Date 09/19/2024	5 Payee name Collin College	
6	Amount (\$) \$83.20	7 Payee address; City; State; Zip Code 4800 Preston Park Boulevard Plano, TX 75093	
8	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense 3 Venue expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	07/17/2024	Devscape Software, Inc.	
	Amount (\$) \$320.00	Payee address;City;State; Zip Code5870 Wind Cave Lane	
		Jacksonville, FL 32258	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	08/26/2024	Devscape Software, Inc.	
	Amount (\$) \$320.00	Payee address;City;State; Zip Code5870 Wind Cave Lane	
		Jacksonville, FL 32258	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense INSE
	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 Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	rhead/ pense pense ages/0	Contract Labor		Travel in District Travel Out of Distric	ipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID ((Ethics Commission Filers)	
	Sch: 9/37 Rpt: 74/103		Collin County Republican Party (CEC)					00053162	· · · · · ·	
4	Date	5	Payee name							
	09/19/2024		Devscape Software, Inc.							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de					
	\$320.00		5870 Wind Cave Lane							
			Jacksonville, FL 32258							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	al da l	(b)	Description				
Ĵ	OF		Office Overhead/Rental Expense	edule)	()		outsi	de of Texas. Comple	ete Schedule T.	
	EXPENDITURE				Ī	Check if Austin	, TX,	officeholder living ex	xpense	
					:	software				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name O	office sou	ght			Office held	1	
	Date		Payee name							
	09/11/2024		Disimone, Frank							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$606.44		1234 Dibrell Dr.							
			Plano, TX 75023							
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) 	Description	outoi	de of Toylog, Comple	ta Cabadula T	
	EXPENDITURE		Advertising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
					I			or email servi		
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		candidate/Officeholder name O	ffice sou	ght			Office held	1	
	Date		Payee name							
	07/17/2024		Executive Press Inc							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$789.79		1400 Presidential							
			Suite 110							
			Richardson, TX 75080							
_	DUDDOCE				(1-)	. :				
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(a) 1	Description Check if travel	outsio	de of Texas. Comple	ete Schedule T.	
	EXPENDITURE		Printing Expense		İ			officeholder living ex		
						printing mate	rials	S		
	Complete ONLY if direct		candidate/Officeholder name O	office sou	ght			Office held	ł	
	expenditure to benefit C/OI	Н								

				EVDEN	DITURE CATEGO			DV 0/-)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							oment & Related Expense				
1	Total pages Schedule F1:	2		-					2	Filer ID	(F	Ethics Commission Filers)
1	Sch: 10/37 Rpt:	 			can Party (CEC	:)			ľ	00053162		
4	Date	5				.)				00000102	-	
-	09/19/2024		Payee name Executive F									
6 Amount (\$) 7 Payee address; City; State; Zip Code												
	\$708.64		1400 Presid	dential								
			Suite 110									
			Richardson	TX 75080	J							
_	BUBBAAF						<i>a</i> >					
8	PURPOSE OF	(a)			sted at the top of this se	chedule)	(0)	Description	outoi	de of Texas. Co	malat	
	EXPENDITURE		Printing Ex	oense						officeholder livi	•	
								printing for vo				
								p				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	iceholder na	ıme	Office sou	l Ight			Office I	held	
	Date		Payee name									
	07/17/2024		Frontier Co	mmunicati	ons							
	Amount (\$)		Payee addre	ss; City	; Stat	e; Zip Co	ode					
	\$44.65		PO Box 74	-								
			Cincinnatti,	OH 45274	-0407							
	PURPOSE	(a)	Category (S	ee Categories li	sted at the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE		Office Over					Check if travel	outsi	de of Texas. Co	mplet	e Schedule T.
	EXFENDITORE									officeholder livi	ng exp	bense
								internet servi	се			
	Complete ONLY if direct		Candidate/Off	iceholder na	ime	Office sou	ight			Office I	held	
	expenditure to benefit C/OI	Η										
	Date		Payee name									
	08/26/2024		Frontier Co	mmunicati	ons							
	Amount (\$)		Payee addre	ss; City		e; Zip Co	ode					
	\$44.65		PO Box 74		,	-, _,,						
	φ00			5-101								
			Cincinnatti,		0407							
			Ciricimati,	UH 45274	-0407							
	PURPOSE OF	(a)			sted at the top of this se	chedule)	(b)	Description				
	EXPENDITURE		Office Over	head/Rent	al Expense					de of Texas. Co officeholder livi	•	
								internet servi		onicenoider iivi	ng exp	Jense
								THE THE SEIVI	66			
	Complete ONUM Station			a a b a l -l - ::		Office				0.45	h a ! - !	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	cenolaer na	une	Office sou	ignt			Office I	neid	

	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 explain:	Office Ov Polling Ex Printing E Salaries/V	verhea xpense Expense Wages	se s/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: 11/37 Rpt:		Collin County Republican Party (CEC)				00053162		
4	Date	5	Payee name							
	09/19/2024		Frontier Communications							
6	6 Amount (\$) \$44.64 PO Box 740407 Cincinnatti, OH 45274-0407									
8	PURPOSE	(a)			(b)	Description				
-	 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 internet service 									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name	Office sou	ught			Office held			
	Date		Payee name							
08/26/2024			Google, Inc.							
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode					
	\$101.13		1600 Amphitheatre Pkwy. Mountain View, CA 94043							
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense advertising 								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held		
	Date		Payee name							
	09/19/2024		Google, Inc.							
	Amount (\$) \$50.57		Payee address; City; Stat 1600 Amphitheatre Pkwy.	e; Zip Co	ode					
			Mountain View, CA 94043		-					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this so Advertising Expense	chedule)	(b)			de of Texas. Complete Schedule T. officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			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 Gitf/Awards/Memorials Expense mmittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/W	xpense Wages/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: 12/37 Rpt:		Collin County Republican Party (CEC))			00053162			
4	Date	5	Payee name							
	07/22/2024		Haggard Party Barn							
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode					
	\$500.00		5948 McKamy Trail							
			Plano, TX 75024							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sci	hedule)	(b) Description					
	OF		Event Expense	neuule)		outs	ide of Texas. Complete Schedule T.			
	EXPENDITURE		•		Check if Austin	, тх	, officeholder living expense			
					event venue					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ught		Office held			
	Date		Payee name							
	09/19/2024		Hobby Lobby							
	Amount (\$)		Payee address; City; State	; Zip Co	ode					
	\$74.46		5238 Preston Rd.	, zip 00						
	Φ74.40		J250 Freston Ru.							
			Plano, TX 75034							
	PURPOSE	(a)	Category (See Categories listed at the top of this sc	hedule)	(b) Description					
	OF EXPENDITURE		Event Expense				ide of Texas. Complete Schedule T.			
							, officeholder living expense			
					Event expens	se				
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	laht		Office held			
	expenditure to benefit C/Oł			Onice sou	ight		Once neid			
-	Date		Payee name							
	07/17/2024		Home Depot							
	Amount (\$)			; Zip Co	ode					
	\$140.89		1801 W. Parker Rd.	<i>ε</i> , Ζιρ Cu	Jue					
	Φ140.09									
			Plano, TX 75023							
	PURPOSE	(a)	Category (See Categories listed at the top of this sci	hedule)	(b) Description					
	OF EXPENDITURE		Office Overhead/Rental Expense				ide of Texas. Complete Schedule T.			
	EXPENDITORE						, officeholder living expense			
					office supplie	S				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught		Office held			
		1								

			EXPENDITURE CAT	EGOR	RIES 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 umittee Legal Services The Instruction Guide exp		Office Ove Polling Exp Printing Ex Salaries/W	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)
1	Total pages Schedule F1:	2				•	3	Filer ID (Ethics Commission Filers)
-	Sch: 13/37 Rpt:	2	Collin County Republican Party (C	CEC)				00053162
4	Date	5	Payee name					
	08/26/2024		Home Depot					
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	de		
	\$43.63		1801 W. Parker Rd.					
			Plano, TX 75023					
8	PURPOSE	(a)				(b) Decoription		
ľ	OF	(a)	Category (See Categories listed at the top of Office Overhead/Rental Expense	this sche	edule)	(b) Description Check if travel	outs	ide of Texas. Complete Schedule T.
	EXPENDITURE		Onice Overhead/Nental Expense					, officeholder living expense
						office supplie	es	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	0	Office sou	Jht		Office held
	Date		Payee name					
	07/17/2024		IRS Payroll Tax					
_	Amount (\$)		Payee address; City;	State:	Zip Co	de		
	\$1,436.16		PO Box 409101	,				
	+_,							
			Ogden , UT 84409					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Salaries/Wages/Contract Labor	this sche	edule)			ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name	0)ffice sou	Jht		Office held
	Date		Payee name					
	08/26/2024		IRS Payroll Tax					
	Amount (\$)		-	State	Zip Co	1e		
	\$678.40		PO Box 409101	otato,	2.0 00			
	\$010.40							
			Ogden , UT 84409					
	PURPOSE OF	(a)	Category (See Categories listed at the top of	this sche	edule)	(b) Description		
	EXPENDITURE		Salaries/Wages/Contract Labor					ide of Texas. Complete Schedule T. , officeholder living expense
-	Complete ONLY if direct	<u>ر</u>	andidate/Officeholder name	0	Office sou	t		Office held
	expenditure to benefit C/OF			0				
_								

	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 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)							
_	Sch: 14/37 Rpt:	Collin County Republican Party (CEC)	00053162							
4	Date 09/19/2024	Payee name IRS Payroll Tax								
6 Amount (\$) \$678.40 Ogden , UT 84409 7 Payee address; City; State; Zip Code PO Box 409101 Ogden , UT 84409										
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense P/R Taxes										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/26/2024	India Association of North Texas								
	Amount (\$)Payee address;City;State;Zip Code\$480.00701 N. Central Expy									
		Richardson, TX 75080								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense event expense								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/19/2024	Johnston, Shelby								
	Amount (\$) \$1,142.63	Payee address; City; State; Zip Code 5720 Scruggs Way #12107 Plano, TX 75024								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense ent for advertising 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/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl	Office C Polling F Printing Salaries	verhe Expen Exper Wage	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	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 15/37 Rpt:		Collin County Republican Party (C	EC)				00053162		
4	Date	5	Payee name				I			
	09/19/2024		Kilwin's Ice Cream							
6	Amount (\$)	7	Payee address; City; S	State; Zip C	Code					
	\$303.24		7161 Bishop Rd.							
			Plano, TX 75024							
8	PURPOSE	(a)	Category (See Categories listed at the top of th		(b	Description				
			Event Expense	is schedule)			outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE		·					officeholder living expense		
						Labor Day Ev	ven	t		
_					<u> </u>					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	bught			Office held		
	Date		Payee name							
	07/17/2024		Lapshum, Oleg							
	Amount (\$)		Payee address; City; S	State; Zip C	Code					
	\$182.40		6114 N. Shiloh Rd.							
			Garland, TX 75044							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of the Event Expense	iis schedule)	(b)		, тх,	de of Texas. Complete Schedule T. officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	Office so	bught	:		Office held		
	Date		Payee name							
	07/17/2024		Life Storage							
	Amount (\$)		Payee address; City; S	State; Zip C	Code					
	\$124.16		4005 W. Plano PKWY							
			Plano, TX 75093							
	PURPOSE OF	(a)	Category (See Categories listed at the top of th	nis schedule)	(b	Description	outoi	de of Texas. Complete Schedule T.		
	EXPENDITURE		Office Overhead/Rental Expense				, TX,	officeholder living expense		
-	Complete ONLY if direct	L(Candidate/Officeholder name	Office so	ught			Office held		
	expenditure to benefit C/OI									
-										

		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 Gitt/Awards/Memorials Expense Printing 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:	FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 16/37 Rpt:	Collin County Republican Party (CEC)	00053162
4	Date 08/26/2024	Payee name Life Storage	
6	Amount (\$) \$138.01	Payee address; City; State; Zip Code 4005 W. Plano PKWY Plano, TX 75093	
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense Ə
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/19/2024	Life Storage	
	Amount (\$) \$124.16	Payee address; City; State; Zip Code 4005 W. Plano PKWY	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense Ə
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/19/2024	Lord of Life Lutheran Church	
	Amount (\$) \$160.00	Payee address;City;State; Zip Code3601 W 15th St.	
		Plano, TX 75075	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense /enue
	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 E	xpense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	ment/Reimbursement head/Rental Expense ense gense ages/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: 17/37 Rpt:		Collin County Republican Pa	rty (CEC)				00053162			
4	Date	5	Payee name								
	07/17/2024		MailChimp								
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le					
	\$90.05		675 Ponce de Leon NE								
Atlanta, GA 30308											
8	PURPOSE	(a)	Category (See Categories listed at the	top of this coh	odulo)	b) Description					
-	OF		Office Overhead/Rental Expe		euule)		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE							, officeholder living expense			
						email service	;				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	ht		Office held			
	Date		Payee name								
	08/26/2024		MailChimp								
	Amount (\$)		Payee address; City;	State;	Zip Co	le					
	\$90.05		675 Ponce de Leon NE								
			Suite 5000								
		Atlanta, GA 30308									
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	edule)	b) Description					
	OF EXPENDITURE	Office Overhead/Rental Expense									
								, officeholder living expense			
						email service	÷				
	Complete ONLY if direct		Candidate/Officeholder name		Office souc	ht		Office held			
	expenditure to benefit C/OF				Junce Sout			Once neid			
	Date		Payee name								
	09/19/2024		MailChimp								
	Amount (\$)		Payee address; City;	State:	Zip Co	0					
	\$90.05		675 Ponce de Leon NE	State,	210 000						
	\$50.00		Suite 5000								
			Atlanta, GA 30308								
	PURPOSE OF	(a)	Category (See Categories listed at the		edule)	b) Description	outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Office Overhead/Rental Expe	ense				, officeholder living expense			
email service											
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	ht		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 Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	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)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 18/37 Rpt:		Collin County Republican Party (CEC)				00053162			
4	Date	5	Payee name							
	09/19/2024		Marchese, Cleo							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de					
	\$5.73		6924 Barbarian Drive							
			Plano, TX 75023							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Event Expense	,		outs	ide of Texas. Complete Schedule T.			
	EXPENDITORE						, officeholder living expense			
					reimburse to	r ev	vent expense			
_										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	int		Office held			
	Date		Payee name							
	07/17/2024		Market Street (Allen, Texas)							
	Amount (\$)			Zip Co	le					
	\$837.77		P.O. Box 981535	p 00						
	¢001.11		1.0. 200 001000							
			El Paso, TX 79998-1535							
	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.			
					event expens		, officeholder living expense			
					event expens	50				
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	nht		Office held			
	expenditure to benefit C/Oł				jiit					
-	Date		Payee name							
	07/03/2024		Meintel, Rose Marie							
	Amount (\$)			Zip Co	10					
	\$220.00		2301 Brennan							
	ΨΖΖ0.00									
			Plano, TX 75075							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Food/Beverage Expense	,	Check if travel	outs	ide of Texas. Complete Schedule T.			
	EXPENDITORE						, officeholder living expense			
					food for ever	It				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	yht		Office held			

			EXPENDITURE	CATEGOF	RIES FOF	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 Ex ttee Legal Services The Instruction Guid		Office Ove Polling Ex Printing Ex Salaries/W	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)
1	Total pages Cabadula F1	2 5		e explains i		inplete this form.	1-	Filer ID (Ethics Commission Filers)
L.	Total pages Schedule F1: Sch: 19/37 Rpt:		ollin County Republican Par	ty (CEC)			3	Filer ID (Ethics Commission Filers) 00053162
4	Date 07/17/2024		ayee name ichael's Keys					
6			-	Stata	Zip Co			
0	Amount (\$) \$17.32		ayee address; City; 313 Karla Dr.	State,	Ζιρ Ου	Je		
		Н	urst, TX 76053					
8	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the fifice Overhead/Rental Expe		edule)		n, TX,	side of Texas. Complete Schedule T. K, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	ght		Office held
	Date	Pa	ayee name					
	09/19/2024	Ν	ichaels					
	Amount (\$)	P	ayee address; City;	State;	Zip Co	de		
	\$114.21		314 Ben Rd. achse, TX 75048					
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the vent Expense	top of this sch	edule)		n, TX,	side of Texas. Complete Schedule T. 4, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	ght		Office held
	Date	P	ayee name					
	07/17/2024		icrosoft					
	Amount (\$)	P	ayee address; City;	State;	Zip Co	de		
	\$6.92	0	ne Microsoft Way					
		R	edmond, WA 98052-6399					
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the fifice Overhead/Rental Expe		edule)		n, TX,	side of Texas. Complete Schedule T. K, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	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		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
_	Tatal as we of Oak adult 51				ipiete this form.		Film ID (Ethics Commission Films)			
1	Total pages Schedule F1: Sch: 20/37 Rpt:		FILER NAME Collin County Republican Party (CEC)			3	Filer ID (Ethics Commission Filers) 00053162			
4	Date 08/26/2024		Payee name Microsoft							
6	Amount (\$) \$6.92		Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052-6399							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description 						-				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice soug	ht		Office held			
	Date		Payee name							
	09/19/2024		Microsoft							
	Amount (\$) \$6.92									
		<u> </u>	Redmond, WA 98052-6399							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Office Overhead/Rental Expense	edule)		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice soug	ht		Office held			
	Date		Payee name							
	09/09/2024		Montes, John							
	Amount (\$) \$212.13		Payee address; City; State; 701 Addie Ln.	Zip Coo	e					
			McKinney, TX 75071							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Event Expense	edule)		ı, ТХ,	de of Texas. Complete Schedule T. , officeholder living expense 'ent expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name O	ffice soug	ht		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 Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling 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)						
-	Sch: 21/37 Rpt:	Collin County Republican Party (CEC)	00053162						
4	Date 09/19/2024	Payee name Moo Print							
6	Amount (\$) \$180.13	Payee address; City; State; Zip Code 25 Fairmount Ave. East Providence, RI 02914							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense printing expense Image: Check if Austin, TX, officeholder living expense printing expense									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/17/2024	Mrs. Clean							
	Amount (\$) \$122.88	Payee address; City; State; Zip Code 122.88 125 Fountain Court							
		McKinney, TX 75069							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense PNSE						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/26/2024	Mrs. Clean							
	Amount (\$) \$122.88	Payee address; City; State; Zip Code 125 Fountain Court							
		McKinney, TX 75069							
	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 janitorial expense 							
	Complete ONLY 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 Expen	se	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	ment/Reimbursement head/Rental Expense ense gense ages/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: 22/37 Rpt:		Collin County Republican Party	(CEC)				00053162	
4	Date	5	Payee name						
	09/19/2024		Mrs. Clean						
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le			
	\$122.88		125 Fountain Court						
			McKinney, TX 75069						
8	PURPOSE	(a)	Category (See Categories listed at the top	- 6 41-1 1	- dula)	b) Description			
Ũ	OF	(~)	Office Overhead/Rental Expens		edule)		outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE			C		Check if Austin	, TX,	officeholder living expense	
						janitorial serv	/ice		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	0)ffice sou	ht		Office held	
	Date		Payee name						
	09/19/2024		Office Corp						
	Amount (\$)		Payee address; City;	State:	Zip Co	le			
	\$2,490.62		1935 W. State Street	o tato,	2.p 000				
			Suite 107						
			Garland , TX 75042						
	PURPOSE OF	(a)	Category (See Categories listed at the top		edule)	b) Description			
	EXPENDITURE		Office Overhead/Rental Expens	е				de of Texas. Complete Schedule T. , officeholder living expense	
						office supplie			
						emee cappie			
	Complete ONLY if direct		Candidate/Officeholder name	0)ffice sou	ht		Office held	
	expenditure to benefit C/OI	Н							
-	Date		Payee name						
	07/17/2024		Office Depot						
			•	Ctata	Zip Co				
	Amount (\$) \$97.66		Payee address; City;	State,	ZIP COU	le			
	\$97.00		1751 N Central Expy.						
			McKinney, TX 75070						
	PURPOSE	(0)	-			(b) Decemination			
	OF	(a)	Category (See Categories listed at the top Office Overhead/Rental Expens		edule)	(b) Description Check if travel	outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE		Office Overhead/Rental Expens	e				officeholder living expense	
						office supplie	s		
	Complete ONLY if direct		Candidate/Officeholder name	0	Office soug	ht		Office held	
	expenditure to benefit C/OI	Н							

	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 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)						
1	Sch: 23/37 Rpt:	Collin County Republican Party (CEC)	00053162						
4	Date 09/19/2024	Payee name Office Depot							
6	Amount (\$) \$56.30	Payee address; City; State; Zip Code 1751 N Central Expy. McKinney, TX 75070							
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense office Supplies								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/19/2024	Party Rentals							
	Amount (\$) \$413.88	Payee address; City; State; Zip Code 519 EI-30 #206 Rockwall, TX 75087							
	PURPOSE OF EXPENDITURE		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense Vent expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/19/2024	Pierce & Son Air Conditioning							
	Amount (\$) \$298.60	Payee address; City; State; Zip Code 10909 Sanden Dr.							
		Dallas, TX 75238							
	PURPOSE OF EXPENDITURE		l outside of Texas. Complete Schedule T. n, 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/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor S 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:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 24/37 Rpt:		Collin County Republican Party (CEC)					00053162		
4	Date	5	Payee name							
	09/19/2024		Plano Parks & Recreation							
6	Amount (\$)	7	Payee address; City; State; Zip Code							
	\$144.00		5904 Los Rios Blvd.							
			Plano, TX 75074							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	(alube	(b)	Description				
	OF		Event Expense	cuuic)			outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE					Check if Austin	, TX,	, officeholder living expense		
						event venue	exp	bense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ght			Office held		
	Date		Payee name							
	07/01/2024		Prosperity Bank							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$51.75		4295 San Felipe							
			Prosperity Bank Plaza							
			Houston, TX 77027							
	PURPOSE	(2)			(h)	Description				
	OF	(4)	Category (See Categories listed at the top of this sche Fees	edule)	(5)	Description	outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE							, officeholder living expense		
						Bank Fees				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	Office sou	ght			Office held		
_	Date	—	Payee name							
	08/30/2024		Prosperity Bank							
	Amount (\$)			Zip Co	do					
	\$181.70		4295 San Felipe	210 00	uc					
	φ101.70									
			Prosperity Bank Plaza							
			Houston, TX 77027							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description				
	EXPENDITURE		Fees					ide of Texas. Complete Schedule T. , officeholder living expense		
						Bank Fees	, 17,			
-	Complete ONLY if direct	Ľ	Candidate/Officeholder name O	Office sou	aht			Office held		
	expenditure to benefit C/Oł				9.11					

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			-	Loan Repayment/Reimbursement Office Overhead/Rental Expense Expense Polling 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:	5				12	Filer ID	(Ethics Commission Filers)			
1	Sch: 25/37 Rpt:	2	Collin County Republican Party (CEC)				00053162				
4	Date	5	Payee name								
	09/19/2024		Read Between the Lines								
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de						
	\$34.64		7500 Windrose Ave.								
			Ste b160								
			Plano, TX 75024								
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description						
	OF EXPENDITURE		Advertising Expense		Check if travel	outs	ide of Texas. Com	plete Schedule T.			
							, officeholder living	expense			
					advertising n	nate	erials				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office he	eld			
	Date		Payee name								
	07/17/2024		Sam's Club								
_	Amount (\$)		Payee address; City; State;	Zip Co	de						
	\$192.76		1200 E. Spring Creek Pkwy	2.0 00							
	φ192.70										
			Plano, TX 75074								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Event Expense	edule)		ı, TX	ide of Texas. Com				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office he	eld			
	Date		Payee name								
	09/19/2024		Sam's Club								
				Zie O-	do						
	Amount (\$)			Zip Co	ue						
	\$115.15		1200 E. Spring Creek Pkwy								
			Plano, TX 75074								
	PURPOSE	(a)	Category (See Categories listed at the top of this scho	edule)	(b) Description						
	OF EXPENDITURE		Event Expense	,		ı, TX	ide of Texas. Com , officeholder living nt				
-	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder name C	Office sou	aht		Office he	bld			
	expenditure to benefit C/OF			51108 SUU	gin		Onice he	20			

	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		•		•	3	Filer ID (Ethics Commission Filers)			
-	Sch: 26/37 Rpt:		Collin County Republican Party (00053162							
4	Date 07/17/2024		Payee name Sims, Kyle								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$64.00		5312 Fox Chase Ln.								
			McKinney, TX 75071								
8	PURPOSE OF		Category (See Categories listed at the top of	of this sch	edule)	(b) Description					
	EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T. , officeholder living expense			
						security for n					
							.00				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held			
	Date		Payee name								
	07/18/2024		Sims, Kyle								
	Amount (\$)		Payee address; City;	State;	; Zip Co	de					
	\$150.00		5312 Fox Chase Ln.								
			McKinney, TX 75071								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Event Expense	f this sch	edule)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense nt			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ght		Office held			
	Date		Payee name								
	08/26/2024		Sims, Kyle								
-	Amount (\$)		Payee address; City;	State:	; Zip Co	de					
	\$32.00		5312 Fox Chase Ln.	,							
			McKinney, TX 75071								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Event Expense	f this sch	edule)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense			
	Complete ONLY if direct		andidate/Officeholder name	C	Office sou	ght		Office held			
	expenditure to benefit C/OF	Н									

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Comn Credit Card Payment			-	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: 27/37 Rpt:		Collin County Republican Party (CEC)	1				00053162		
4	Date 09/19/2024	5	Payee name Southfork							
_		_								
6	Amount (\$)	7								
	\$7,813.14		3700 Hogge Rd							
			Parker, TX 75002							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Event Expense					de of Texas. Complete Schedule T.		
								officeholder living expense		
						LDD 2025 do	wn	payment		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght			Office held		
	Date		Payee name							
	07/17/2024		Spec's							
	Amount (\$)		Payee address; City; State	; Zip Co	ode					
	\$340.05		3404 N Central Expy							
			#1000							
			Plano, TX 75074							
	DUDDOOF	(-)			(1-)					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(0)	Description	outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE		Event Expense					officeholder living expense		
						event expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ight			Office held		
_	Data	<u> </u>								
	Date 07/17/2024		Payee name							
			Square							
	Amount (\$)			; Zip Co	bde					
	\$15.36		1455 Market St.							
			Suite 60							
			San Francisco, CA 94103							
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Solicitation/Fundraising Expense					de of Texas. Complete Schedule T.		
	Check if Austin, 1X, officeholder living expense									
	finance expense									
				~ //	Ļ					
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held		
\vdash										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment			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: 28/37 Rpt:		Collin County Republican Party (CEC)	00053162						
4	Date 07/17/2024	5	Payee name Square							
6	Amount (\$) \$23.04	7	7 Payee address; City; State; Zip Code 1455 Market St. Suite 60 San Francisco, CA 94103							
8	B PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense credit card fees						-			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ht		Office held			
	Date		Payee name							
	08/26/2024		Square							
	Amount (\$) \$57.64		Payee address; City; State; 1455 Market St. Suite 60 San Francisco, CA 94103	Zip Co	le					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ht		Office held			
	Date		Payee name							
	09/19/2024		Square							
	Amount (\$) \$135.19		Payee address; City; State; 1455 Market St. Suite 60 San Francisco, CA 94103	Zip Co	le					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Solicitation/Fundraising Expense	edule)		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ht		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 Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing 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)						
	Sch: 29/37 Rpt:	Collin County Republican Party (CEC)	00053162						
4	Date 08/26/2024	Payee name Staples Office Supply							
6	Amount (\$) \$154.43	Payee address; City; State; Zip Code 8676 State Highway 121 McKinney, TX 75070							
8	PURPOSE OF EXPENDITURE	OF Office Overhead/Pental Expense							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/15/2024	Stripe							
	Amount (\$) \$89.07	Payee address; City; State; Zip Code 510 Townsend St. San Francisco, CA 94103							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense 2S						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	ught Office held						
	Date	Payee name							
	08/15/2024	Stripe							
	Amount (\$) \$66.25	Payee address;City;State;Zip Code510 Townsend St.							
		San Francisco, CA 94103							
	PURPOSE OF EXPENDITURE	OF Solicitation/Eundraising Expense							
	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		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide explains I	Office Over Polling Exp Printing Ex Salaries/W	oense ages/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: 30/37 Rpt:		Collin County Republican Party (CEC)	00053162						
4	Date 09/16/2024		Payee name Stripe							
6	Amount (\$)		Payee address; City; State; Zip Code							
U	\$59.67	:	San Francsico, CA 94080							
0	DUDDOCE									
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense credit card fees									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name C	Office sou	ht		Office held			
	Date		Payee name							
07/17/2024 Survey Planet										
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$12.80	80 578 Washington Blvd. Marina Del Ray, CA 90292								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this scho Office Overhead/Rental Expense	edule)			ide of Texas. Complete Schedule T. , officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ht		Office held			
	Date		Payee name							
	08/26/2024		Survey Planet							
	Amount (\$) \$12.80		Payee address; City; State; 578 Washington Blvd.	Zip Co	le					
			Marina Del Ray, CA 90292							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this scho Office Overhead/Rental Expense	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense S C			
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder name C	Dffice sou	ht		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 Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)						
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)						
1	Sch: 31/37 Rpt:	Collin County Republican Party (CEC)	00053162						
4	Date 09/19/2024	Payee name Survey Planet							
6	Amount (\$)	Payee address; City; State; Zip Code							
	\$12.80	578 Washington Blvd.							
		Marina Del Ray, CA 90292							
8	PURPOSE OF EXPENDITURE		ıtside of Texas. Complete Schedule T. TX, officeholder living expense						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/17/2024	TXU Energy							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$274.13	P. O. Box 650638 Dallas, TX 75265-0638							
	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						
	Date	Payee name							
	08/26/2024	TXU Energy							
	Amount (\$) \$326.86	Payee address;City;State;ZipCodeP. O. Box 650638							
		Dallas, TX 75265-0638							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense						
	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	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Office Overhead/Rental Expense Gift/Awards/Memorials Expense 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)					
-	Sch: 32/37 Rpt:	Collin County Republican Party (CEC)	00053162					
4	Date	Payee name						
	09/19/2024	TXU Energy						
6	Amount (\$)	Payee address; City; State; Zip Code						
	\$373.87	P. O. Box 650638						
		Dallas, TX 75265-0638						
8	PURPOSE							
ľ	OF		utside of Texas. Complete Schedule T.					
	EXPENDITURE		TX, officeholder living expense					
		electric utility						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	08/26/2024	Taco Cabana						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$13.85	18130 Coit Road						
		Dallas, TX 75252						
	PURPOSE OF	Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
		food	rx, onceroider living expense					
		1000						
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit C/OF	Sanadade/Since holder hand Since Sought						
_	Data	Device neme						
	Date 07/17/2024	Payee name Temu						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$64.64	31 Saint James Ave.						
		Ste 355						
	Boston, MA 02116							
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE		utside of Texas. Complete Schedule T.					
			TX, officeholder living expense					
		office supplies	2					
	Openalists ONUN if dive st							
	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 Com 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					2	Filer ID (Ethics Commission File	ars)		
1	Sch: 33/37 Rpt:	2	Collin County Republican Party (CE	EC)				00053162	613)		
4	Date	5	Payee name								
	07/17/2024		Tom Thumb								
6	Amount (\$)	7	Payee address; City; S	tate;	Zip Co	le					
	\$19.17		5968 Parker Rd.								
			Plano, TX 75093								
8	PURPOSE	(a)				(b) Description					
ľ	OF	(4)	Category (See Categories listed at the top of thi Food/Beverage Expense	s scheo	dule)	(b) Description Check if travel	outs	side of Texas. Complete Schedule T.			
	EXPENDITURE		rood/Develage Expense					, officeholder living expense			
						food					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Of	ffice sou	ıht		Office held			
	Date		Payee name								
	09/19/2024		USPS								
-	Amount (\$)		Payee address; City; S	tate:	Zip Co	le					
	\$97.92		4745 Star Ridge Ln	,							
	\$01.0 <u>2</u>										
			Frisco, TX 75034								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of thi Office Overhead/Rental Expense	s scheo	dule)			side of Texas. Complete Schedule T. K, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/O			Candidate/Officeholder name	Of	ffice sou	lht		Office held			
	Date	ĺ	Payee name								
	07/17/2024		Vista Print USA								
	Amount (\$)		Payee address; City; S	tate.	Zip Co	10					
	\$86.07		275 Wyman Street	iaic,	2ip 00						
	400.01										
			Waltham, MA 02451								
	PURPOSE OF	(a)	Category (See Categories listed at the top of thi	s scheo	dule)	(b) Description					
	EXPENDITURE		Printing Expense					side of Texas. Complete Schedule T.			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Of	ffice sou	Jht		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 Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)								
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)								
	Sch: 34/37 Rpt:	Collin County Republican Party (CEC)	00053162								
4	Date 07/17/2024	Payee name Wade, Terry									
6	Amount (\$)	Payee address; City; State; Zip Code									
	\$1,132.69	3505 Michael Dr									
		Plano, TX 75023									
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	08/26/2024	Wade, Terry									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$1,618.13	3505 Michael Dr Plano, TX 75023									
	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								
	Date	Payee name									
	09/19/2024	Wade, Terry									
	Amount (\$) \$1,618.13	Payee address;City;State;Zip Code3505 Michael Dr									
		Plano, TX 75023									
	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/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 Legal Services 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)					
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)					
1	Sch: 35/37 Rpt:	Collin County Republican Party (CEC)	00053162					
4	Date 07/17/2024	Payee name Walmart Supercenter						
6	Amount (\$) \$59.71	Payee address; City; State; Zip Code 8801 Ohio Dr. Plano, TX 75024						
8	PURPOSE OF EXPENDITURE	OF Office Overhead/Rental Expense						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	08/26/2024	Walmart Supercenter						
	Amount (\$) \$105.16	Payee address; City; State; Zip Code 8801 Ohio Dr. Plano, TX 75024						
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (b) Description Office Overhead/Rental Expense Check if travel of the schedule)	nutside 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						
	09/19/2024	Walmart Supercenter						
	Amount (\$) \$43.65	Payee address;City;State;Zip Code8801 Ohio Dr.						
		Plano, TX 75024						
	PURPOSE OF EXPENDITURE		uutside 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					

EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Comn 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	· · · · ·			·	3	Filer ID (Ethics Commission Filers)			
	Sch: 36/37 Rpt:		Collin County Republican Party (CE	C)				00053162			
4	Date 07/11/2024		Payee name Will, Brian								
6	Amount (\$) \$63.59		Payee address; City; Sta 2609 Redfield Dr. Plano, TX 75025	ate; Zij	p Cod	e					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description 											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office	e soug	ht		Office held			
	Date		Payee name								
	08/26/2024		Williams, Shelby								
	Amount (\$) \$156.09		Payee address; City; Sta 6040 Garden Gate Dr. Plano, TX 75024	ate; Zij	p Cod	e					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Advertising Expense	schedule) (, TX,	side of Texas. Complete Schedule T. K, officeholder living expense DPY expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office	e soug	ht		Office held			
	Date		Payee name								
	09/19/2024		Williams, Shelby								
	Amount (\$) \$25.59		Payee address; City; Sta 6040 Garden Gate Dr.	ate; Zij	p Cod	e					
			Plano, TX 75024								
PURPOSE OF EXPENDITURE			Category (See Categories listed at the top of this Office Overhead/Rental Expense	schedule) (, TX	side of Texas. Complete Schedule T. K, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office	e soug	ht		Office held			

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

SCHEDULE K

		ction Guide explains how to complete this form.	1	Total p	ages Schedule K:	
	The Instru	Sch: 1	n: 1/1 Rpt: 103/103			
2	FILER NAME		3		O (Ethics Commission	Filers)
	Collin Count	y Republican Party (CEC)		00053	3162	
4	Date	5 Name of person from whom amount is received			8 Amount (\$)	
	07/31/2024	Texas Republic Bank				\$36.27
		6 Address of person from whom amount is received; City; State; Zip Code				
		Frisco, TX 75034				
			politi	cal conti	I ribution returned to filer	
		Interest earned				
	Date	Name of person from whom amount is received			Amount (\$)	
	08/30/2024	Texas Republic Bank				\$32.01
		Address of person from whom amount is received; City; State; Zip Code				
		Frisco, TX 75034				
		Purpose for which amount is received Check if interest earned	politi	cal conti	ribution returned to filer	