

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00015555	2 Total pages filed: 104
3 COMMITTEE NAME Associated Republicans of Texas Campaign Fund		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 10/07/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 807 Brazos, Ste. 601 Austin, TX 78701-2526		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mr.	Hector	
		NICKNAME	SUFFIX
		De Leon	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE Building 1 901 S. Mopac, Ste. 300 Austin, TX 78746		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Building 1 901 S. Mopac, Ste. 300 Austin, TX 78746		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(512)	478-5308	
9 REPORT TYPE	<input type="checkbox"/> January 15		
	<input checked="" type="checkbox"/> 30th day before election		
	<input type="checkbox"/> 8th day before election		
	<input type="checkbox"/> 10th day after campaign treasurer termination		
		<input type="checkbox"/> July 15	
		<input type="checkbox"/> Runoff	
10 PERIOD COVERED	Month	Day	Year
	07	01	2024
THROUGH		Month	Day
		09	26
11 ELECTION	ELECTION DATE Month Day Year 11/05/2024		ELECTION TYPE <input type="checkbox"/> Primary
			<input checked="" type="checkbox"/> General
		<input type="checkbox"/> Runoff	<input type="checkbox"/> Other
		<input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund	13 Filer ID (Ethics Commission Filers) 00015555
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Angie Chen Button State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 860,872.05
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 619,295.29
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,214,366.27
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Hector De Leon

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund		13 Filer ID (Ethics Commission Filers) 00015555
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Robert Garza State Representative 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. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Janie Lopez State Representative 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 (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported John Lujan State Representative 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.)	

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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12 COMMITTEE NAME Associated Republicans of Texas Campaign Fund	13 Filer ID (Ethics Commission Filers) 00015555
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Morgan Meyer State Representative
		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 (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Denise Villalobos State Representative
		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 - GPAC

17 COMMITTEE NAME Associated Republicans of Texas Campaign Fund		18 Filer ID (Ethics Commission Filers) 00015555
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 757,110.47
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 5,761.58
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input checked="" type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$ 98,000.00
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 619,295.29
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 855.51

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/28 Rpt: 6/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Lynn <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75218-4409	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agnich, Victoria <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-1963	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Joe <hr/> Contributor address; City; State; Zip Code Houston, TX 77024-6545	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison III, Lester <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-3210	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Monument Energy
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldovin, Donald <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2172	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/28 Rpt: 7/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Lin <hr/> 6 Contributor address; City; State; Zip Code Flint, TX 75762-9340	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Fuel Distribution		9 Employer (See Instructions) Self Employed
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77010-2029	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Beck Redden, LLP
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck III, Henry <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201-7235	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Executive Chairman		Employer (See Instructions) The Beck Group
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beecherl, Will <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-6562	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biggerstaff, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78730-3323	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/28 Rpt: 8/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bing, Eric <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77056-1226	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Consulting		9 Employer (See Instructions) Eric Bing Co., Inc
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Nelda <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380-2402	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Blair Law Firm, PC
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boehm, David <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469-2886	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) MC2 Civil
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bookout III, John <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-1114	Amount of Contribution (\$) \$15,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) JA Capital LLC
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bromberg, Sharon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-4339	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/28 Rpt: 9/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown Family Revocable Living Trust <hr/> 6 Contributor address; City; State; Zip Code Copperas Cove, TX 76522-7002	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) 		9 Employer (See Instructions)
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryan, James <hr/> Contributor address; City; State; Zip Code Houston, TX 77098-1722	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, M. Kevin <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201-2235	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) General Counsel		Employer (See Instructions) Crow Holdings
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, Pierce <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-4098	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Big Brothers Big Sisters Lone Star
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bushong, Harry <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-6511	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) nanoTox

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/28 Rpt: 10/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 07/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, G. Wade <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78205-3545	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Caldwell, East and Finlayson PLLC
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, G. Wade <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205-3545	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Caldwell, East and Finlayson PLLC
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, G. Wade <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205-3545	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Caldwell, East and Finlayson PLLC
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, G. Wade <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205-3545	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Caldwell, Clark, Fanucchi & Finlayson PLLC
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Pamela <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-4101	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/28 Rpt: 11/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castleman, Pamela <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77057-8004	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Castleman Power Development LLC
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Justin <hr/> Contributor address; City; State; Zip Code Midland, TX 79707-9116	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay Cooley Investments <hr/> Contributor address; City; State; Zip Code Irving, TX 75015-3526	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay III, Albert <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-3502	Amount of Contribution (\$) \$6,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Clay Development & Construction
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Richard <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206-1833	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Chairman & CEO		Employer (See Instructions) Istation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/28 Rpt: 12/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook Jr., Robert <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75231-2703	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deuell, Robert <hr/> Contributor address; City; State; Zip Code Greenville, TX 75402-8019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Hunt Regional Medical Partners
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Favre, Mary <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77478-1500	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Robert <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107-3638	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Self Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finkelman, Steven <hr/> Contributor address; City; State; Zip Code Houston, TX 77096-4109	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) Scope Imports, Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/28 Rpt: 13/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, William <hr/> 6 Contributor address; City; State; Zip Code Bryan, TX 77802-5936	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Serolf Technologies
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freestone, Mack <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546-3709	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frischkorn, Anne <hr/> Contributor address; City; State; Zip Code Alvin, TX 77511-9127	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gest, Albert <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411-2321	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, James <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206-4015	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Five States Energy Capital, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/28 Rpt: 14/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Meredith	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Hempstead, TX 77445-8236		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonsoulin, Al	Amount of Contribution (\$) \$25,000.00
Contributor address; City; State; Zip Code Sugar Land, TX 77496-6757		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Gonsoulin Enterprises Inc
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gossett, Greg	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code San Angelo, TX 76906-2324		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Gossett, Harrison, Millican & Stipanovic, PC
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Harry	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Midland, TX 79701-5721		
Principal occupation / Job title (See Instructions) Geologist		Employer (See Instructions) West Bay Exploration Co.
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grammer, Jonathan	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Amarillo, TX 79121-1852		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Grammer Land Exploration Corp.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/28 Rpt: 15/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grammer, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79159-0908	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Grammer Land Exploration Corp.
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grenader, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5025	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Ray <hr/> Contributor address; City; State; Zip Code Spring, TX 77388-5870	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Houston WiFi Ltd. Co.
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HPCP Investments LLC <hr/> Contributor address; City; State; Zip Code Houston, TX 77241-1567	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawk, Thomas <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-3133	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/28 Rpt: 16/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Amy <hr/> 6 Contributor address; City; State; Zip Code Devers, TX 77538-0518	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Rancher		9 Employer (See Instructions) Henderson Partners
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herndon, H. David <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-1106	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-6234	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holsenbeck, Howard <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-5606	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hook, Joanne <hr/> Contributor address; City; State; Zip Code Houston, TX 77025-3347	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/28 Rpt: 17/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffines, James <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205-3119	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Finance		9 Employer (See Instructions) JRH Partners
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunsicker, Alison <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-2612	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Mockingbird Management
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Woody <hr/> Contributor address; City; State; Zip Code El Paso, TX 79913-0667	Amount of Contribution (\$) \$125,000.00
Principal occupation / Job title (See Instructions) Senior Chairman of the Board		Employer (See Instructions) Hunt Companies
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurt, William <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-4009	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) U.S. Capital Advisors
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivey III, Ben <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-1403	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/28 Rpt: 18/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 08/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Douglas <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225-5014	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Wealth Manager		9 Employer (See Instructions) Requisite Capital Management, LLC
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, John <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-1037	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Silver Eagle Houston
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, James <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-1445	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Jones Engineering Solutions
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsey, Thomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-1306	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Locke Liddell & Sapp
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleimann, Carl <hr/> Contributor address; City; State; Zip Code Tomball, TX 77375-5215	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Moffitt Services

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/28 Rpt: 19/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleinheinz, John <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76107-2715	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) CEO/President		9 Employer (See Instructions) Kleinheinz Capital Partners Inc
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korbell, John <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212-2512	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korenvaes, Harlan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-2149	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Investment Manager		Employer (See Instructions) Korenvaes Management
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Martha <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107-3537	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levine, Herbert <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-4625	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Real Estate - President		Employer (See Instructions) Levcor, Inc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/28 Rpt: 20/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Light, Walter <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209-0598	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Oil and Gas Exploration		9 Employer (See Instructions) Lightning Oil Co.
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lollar, Klinka <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-4118	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahomes Jr., William <hr/> Contributor address; City; State; Zip Code Dallas, TX 75379-4252	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney/Of Counsel		Employer (See Instructions) Bracewell
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marchant Good Government Fund <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006-3016	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCorvey, Anthony <hr/> Contributor address; City; State; Zip Code Houston, TX 77029-1314	Amount of Contribution (\$) \$7,500.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) McCorvey Sheet Metal Works, LP

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/28 Rpt: 21/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Ann	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Lubbock, TX 79416-4721		
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Homemaker
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenzie, Michael	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Sulphur Springs, TX 75482-2120		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McQueeney, John	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Fort Worth, TX 76109-1514		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Vision TX Trans, Inc
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Robert	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75201-2750		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Locke Lord, LLP
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mischer, Paula	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code Houston, TX 77024-7315		
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) PMW, Inc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/28 Rpt: 22/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modesett, David <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019-5925	7 Amount of Contribution (\$) \$50,000.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Vega Energy Holdings Ltd.
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moody, John <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-6211	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Parkside Capital
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moody, Walker <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-1415	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Pickering Energy Partners
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosing, Keith <hr/> Contributor address; City; State; Zip Code Houston, TX 77042-3107	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Mosing Group
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murchison, Maggie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-6604	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/28 Rpt: 23/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nau, Barbara <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77098-1002	7 Amount of Contribution (\$) \$50,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Dennis <hr/> Contributor address; City; State; Zip Code Houston, TX 77024-6412	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Mission Management Company
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Gary <hr/> Contributor address; City; State; Zip Code Sonoma, CA 95476-3092	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumann, Roxann <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-5106	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Senior Vice President		Employer (See Instructions) Silver Eagle Beverages
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nickson, Charlene <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-5289	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Nickson Industrial Warehouses

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/28 Rpt: 24/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nye, Erle <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225-3963	7 Amount of Contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) EN Consulting Inc.
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Leary, Louri <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-3821	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Office Administrator		Employer (See Instructions) TFRW
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborne, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243-5214	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) United Mechanical
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patton, Sherri <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107-3529	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perot Jr., H. Ross <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-6268	Amount of Contribution (\$) \$250,000.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Perot Services Company, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/28 Rpt: 25/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickett Stevenson, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77056-2030	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Pickett Law Group, PLLC
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prentiss, Mike <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-2878	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quadvest Water & Sewer Utility <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77354	Amount of Contribution (\$) \$15,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quick, Robert <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-2809	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Western Addition
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richey, Jacquelyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-1620	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/28 Rpt: 26/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riney, Sandra <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304-1616	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Lubchem Inc.
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romans, Jerry <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76132-3736	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Dax <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-5083	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Kinder Morgan
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sasser, Ford <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501-8950	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Rio Bank
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuh, Martha <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230-4338	Amount of Contribution (\$) \$20.47
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/28 Rpt: 27/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seliger, Kel <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79121-1802	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Lea <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77498-2925	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Community Volunteer		Employer (See Instructions) Self Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, E. Ashley <hr/> Contributor address; City; State; Zip Code Houston, TX 77046-1426	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Chief Legal Officer/ Executive VP		Employer (See Instructions) Stewart Information Services Corp.
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Thomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-2329	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanton Jr., R. John <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-3131	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/28 Rpt: 28/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steen, James <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027-4016	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Oil & Gas		9 Employer (See Instructions) Buckhorn Resources
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens Jr., John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-2321	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoecker, Michael <hr/> Contributor address; City; State; Zip Code Conroe, TX 77305-0247	Amount of Contribution (\$) \$12,500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teel, Gerald <hr/> Contributor address; City; State; Zip Code Houston, TX 77095-5027	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) The Gerald A Teel Company, Inc
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Telle, J. Thomas <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624-7031	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/28 Rpt: 29/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thacker, William <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76308	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Ralph <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-1320	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomason, Christopher <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201-2167	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Wallace Capital
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson Jr., Charles <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501-2897	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self Employed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tonn, Melissa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-1219	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Chief Medical Officer		Employer (See Instructions) OccMD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/28 Rpt: 30/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valach, Kenneth <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77024-5006	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Crow Holdings Development
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vale, Robert <hr/> Contributor address; City; State; Zip Code McAllen, TX 78504-3512	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) VP of Trade		Employer (See Instructions) Starr-Camargo Bridge Co.
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vale, Sam <hr/> Contributor address; City; State; Zip Code Rio Grande City, TX 78582-0156	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Starr-Camargo Bridge Co.
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Cye <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76109-1137	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Cooper Oil Gas, Inc
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagnon, Robert <hr/> Contributor address; City; State; Zip Code Houston, TX 77030-3622	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Republic State Mortgage Co

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/28 Rpt: 31/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Fay <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77024-5611	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Government Affairs		9 Employer (See Instructions) Apache Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walter, Jeffrey <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-5224	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Investment Manager		Employer (See Instructions) Centenary Management Company
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, George <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-2004	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Steelcreek Management LLC
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webster, Steven <hr/> Contributor address; City; State; Zip Code Houston, TX 77098-1285	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Avista Capital Partners
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Betty <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-2418	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/28 Rpt: 32/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witges, Debra <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055-6874	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yang, Deqing <hr/> Contributor address; City; State; Zip Code Houston, TX 77024-4231	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Allwin Insurance Agency
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarborough, Donald <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-6032	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Foster Yarborough
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamora, Denyse <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051-4552	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Real Estate Sales		Employer (See Instructions) Self Employed
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamora, Denyse <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051-4552	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Real Estate Sales		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/28 Rpt: 33/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamora, Denyse <hr/> 6 Contributor address; City; State; Zip Code Grapevine, TX 76051-4552	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Real Estate Sales		9 Employer (See Instructions) Self Employed

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 34/104	
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 09/09/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nau III, John <hr style="border-top: 1px dotted black;"/> 7 Contributor address; City; State; Zip Code Houston, TX 77019-3024	8 Amount of contribution (\$) \$5,761.58	9 In-kind contribution description Event food/beverage catering <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Chairman/CEO		11 Employer (FOR NON-JUDICIAL) (See instructions) Silver Eagle Distributors Holdings	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C3: Sch: 1/1 Rpt: 35/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/11/2024	5 Corporation / Labor Organization name Altria Client Services LLC	6 Amount (\$) 25,000.00
Date 07/18/2024	Corporation / Labor Organization name Carcon Industries & Construction LLC	Amount (\$) 2,500.00
Date 09/20/2024	Corporation / Labor Organization name Carcon Industries & Construction LLC	Amount (\$) 2,500.00
Date 07/23/2024	Corporation / Labor Organization name Chevron	Amount (\$) 30,000.00
Date 09/10/2024	Corporation / Labor Organization name Lubchem Inc.	Amount (\$) 2,000.00
Date 09/23/2024	Corporation / Labor Organization name MoakCasey, LLC	Amount (\$) 1,000.00
Date 08/27/2024	Corporation / Labor Organization name The Friedkin Group	Amount (\$) 35,000.00

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/68 Rpt: 36/104	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 07/03/2024	5 Payee name 1303 Properties
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6 Amount (\$) \$2,471.00	7 Payee address; City; State; Zip Code 807 Brazos St Ste 1010 Austin, TX 78701-2508
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking and Rent
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/08/2024	Payee name 1303 Properties
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Amount (\$) \$2,471.00	Payee address; City; State; Zip Code 807 Brazos St Ste 1010 Austin, TX 78701-2508
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking and Rent
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/29/2024	Payee name 1303 Properties
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Amount (\$) \$2,471.00	Payee address; City; State; Zip Code 807 Brazos St Ste 1010 Austin, TX 78701-2508
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking and Rent
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/68 Rpt: 37/104	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/12/2024	5 Payee name 1303 Properties	
6 Amount (\$) \$136.00	7 Payee address; City; State; Zip Code 807 Brazos St Ste 1010 Austin, TX 78701-2508	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/12/2024	Payee name 2El Paso	
Amount (\$) \$73.45	Payee address; City; State; Zip Code 1 Ballpark Plz El Paso, TX 79901	
<input type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/23/2024	Payee name AT&T	
Amount (\$) \$209.52	Payee address; City; State; Zip Code PO Box 105414 Atlanta, GA 30348-5414	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/68 Rpt: 38/104	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555			
4 Date 08/13/2024	5 Payee name AT&T				
6 Amount (\$) \$209.52	7 Payee address; City; State; Zip Code PO Box 105414 Atlanta, GA 30348-5414				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 09/22/2024	Payee name AT&T				
Amount (\$) \$199.53	Payee address; City; State; Zip Code PO Box 105414 Atlanta, GA 30348-5414				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 08/26/2024	Payee name AT&T				
Amount (\$) \$263.76	Payee address; City; State; Zip Code PO Box 105414 Atlanta, GA 30348-5414				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/68 Rpt: 39/104	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555			
4 Date 09/26/2024	5 Payee name AT&T				
6 Amount (\$) \$139.16	7 Payee address; City; State; Zip Code PO Box 105414 Atlanta, GA 30348-5414				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 09/12/2024	Payee name AT&T				
Amount (\$) \$104.23	Payee address; City; State; Zip Code PO Box 105414 Atlanta, GA 30348-5414				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 07/26/2024	Payee name AT&T				
Amount (\$) \$139.46	Payee address; City; State; Zip Code PO Box 105414 Atlanta, GA 30348-5414				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/68 Rpt: 40/104	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 07/14/2024	5 Payee name AT&T
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6 Amount (\$) \$104.38	7 Payee address; City; State; Zip Code PO Box 105414 Atlanta, GA 30348-5414
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/13/2024	Payee name AT&T
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Amount (\$) \$104.38	Payee address; City; State; Zip Code PO Box 105414 Atlanta, GA 30348-5414
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/25/2024	Payee name Allyn Political LLC
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Amount (\$) \$42,640.71	Payee address; City; State; Zip Code 3838 Oak Lawn Ave Ste 400 Dallas, TX 75219-4506
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/68 Rpt: 41/104	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 07/20/2024	5 Payee name Amazon
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6 Amount (\$) \$352.83	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109-5210
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Equipment
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/02/2024	Payee name Austin American Statesman
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Amount (\$) \$15.80	Payee address; City; State; Zip Code 305 S Congress Ave Austin, TX 78704-1200
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/05/2024	Payee name Austin American Statesman
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Amount (\$) \$15.80	Payee address; City; State; Zip Code 305 S Congress Ave Austin, TX 78704-1200
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/68 Rpt: 42/104	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/04/2024	5 Payee name Austin American Statesman
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6 Amount (\$) \$15.80	7 Payee address; City; State; Zip Code 305 S Congress Ave Austin, TX 78704-1200
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/12/2024	Payee name Austin JetSet Market
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Amount (\$) \$8.52	Payee address; City; State; Zip Code 5812 Trade Center Dr Austin, TX 78744-1367
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/13/2024	Payee name Austin-Bergstrom International Airport
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Amount (\$) \$46.00	Payee address; City; State; Zip Code 3600 Presidential Blvd Austin, TX 78719-2363
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/68 Rpt: 43/104	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/13/2024	5 Payee name Austin-Bergstrom International Airport
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6 Amount (\$) \$46.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3600 Presidential Blvd Austin, TX 78719-2363
--	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
---------------------------------	---	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/13/2024	Payee name Austin-Bergstrom International Airport
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Amount (\$) \$64.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3600 Presidential Blvd Austin, TX 78719-2363
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/20/2024	Payee name Best Buy
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Amount (\$) \$378.83 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1201 Barbara Jordan Austin, TX 78723-3083
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Equipment
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/68 Rpt: 44/104	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555			
4 Date 08/30/2024	5 Payee name Blue Cross Blue Shield of Texas				
6 Amount (\$) \$408.69	7 Payee address; City; State; Zip Code Po Box 650615 Dallas, TX 75265-0615				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Employee Health Insurance			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 08/30/2024	Payee name Blue Cross Blue Shield of Texas				
Amount (\$) \$1,301.28	Payee address; City; State; Zip Code Po Box 650615 Dallas, TX 75265-0615				
<input type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Employee Health Insurance			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 07/31/2024	Payee name Blue Cross Blue Shield of Texas				
Amount (\$) \$408.69	Payee address; City; State; Zip Code Po Box 650615 Dallas, TX 75265-0615				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Employee Health Insurance			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 07/31/2024	5 Payee name Blue Cross Blue Shield of Texas	
6 Amount (\$) \$1,301.28 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code Po Box 650615 Dallas, TX 75265-0615	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Employee Health Insurance
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/09/2024	Candidate/Officeholder name Bush, William B.	
Amount (\$) \$230.48 <input type="checkbox"/> Expenditure from corporate funds	Office sought 807 Brazos St Ste 601 Austin, TX 78701-2526	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage at \$.67 per mile
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/31/2024	Candidate/Officeholder name Bush, William B.	
Amount (\$) \$4,166.67 <input type="checkbox"/> Expenditure from corporate funds	Office sought 807 Brazos St Ste 601 Austin, TX 78701-2526	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 08/30/2024	5 Payee name Bush, William B.	
6 Amount (\$) \$4,166.67 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/27/2024	Payee name Canopy Dallas Uptown	
Amount (\$) \$323.49 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2950 Cityplace West Blvd Dallas, TX 75204-1621	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/09/2024	Payee name Central Texas Shredding Inc	
Amount (\$) \$50.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 170174 Austin, TX 78717-0014	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Shredding Services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/12/2024	5 Payee name Central Texas Shredding Inc	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code PO Box 170174 Austin, TX 78717-0014	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Shredding Services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/09/2024	Payee name Charter Communications	
Amount (\$) \$171.48	Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716-0074	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/13/2024	Payee name Charter Communications	
Amount (\$) \$171.48	Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716-0074	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555			
4 Date 09/12/2024	5 Payee name Charter Communications				
6 Amount (\$) \$171.48	7 Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716-0074				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:35%;">Candidate/Officeholder name</td> <td style="width:30%;">Office sought</td> <td style="width:10%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 08/27/2024	Payee name Chick-fil-a				
Amount (\$) \$11.90	Payee address; City; State; Zip Code 1311 S 5th St Waco, TX 76798-1435				
<input type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:35%;">Candidate/Officeholder name</td> <td style="width:30%;">Office sought</td> <td style="width:10%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 09/09/2024	Payee name Chick-fil-a				
Amount (\$) \$38.13	Payee address; City; State; Zip Code 19303 Katy Fwy Houston, TX 77094-1007				
<input type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:35%;">Candidate/Officeholder name</td> <td style="width:30%;">Office sought</td> <td style="width:10%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555			
4 Date 07/26/2024	5 Payee name ClickUp				
6 Amount (\$) \$81.02	7 Payee address; City; State; Zip Code 363 5Th Ave Ste 300 San Diego, CA 92101-7081				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Computer Software Service			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 07/11/2024	Payee name Convergence Media LLC				
Amount (\$) \$5,210.91	Payee address; City; State; Zip Code 130 N Fayette St Alexandria, VA 22314-2902				
<input type="checkbox"/> Expenditure from corporate funds					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Consulting Services			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 08/08/2024	Payee name Convergence Media LLC				
Amount (\$) \$5,209.93	Payee address; City; State; Zip Code 130 N Fayette St Alexandria, VA 22314-2902				
<input type="checkbox"/> Expenditure from corporate funds					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Consulting Services			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border:none;">Candidate/Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/10/2024	5 Payee name Convergence Media LLC
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6 Amount (\$) \$5,211.73 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 130 N Fayette St Alexandria, VA 22314-2902
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Consulting Services
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/24/2024	Payee name Convergence Media LLC
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Amount (\$) \$4,435.17 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 130 N Fayette St Alexandria, VA 22314-2902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/24/2024	Payee name Convergence Media LLC
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Amount (\$) \$3,961.15 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 130 N Fayette St Alexandria, VA 22314-2902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/24/2024	5 Payee name Convergence Media LLC
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6 Amount (\$) \$3,232.12 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 130 N Fayette St Alexandria, VA 22314-2902
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/24/2024	Payee name Convergence Media LLC
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Amount (\$) \$11,104.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 130 N Fayette St Alexandria, VA 22314-2902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/24/2024	Payee name Convergence Media LLC
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Amount (\$) \$10,071.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 130 N Fayette St Alexandria, VA 22314-2902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/24/2024	5 Payee name Convergence Media LLC
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6 Amount (\$) \$7,195.08 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 130 N Fayette St Alexandria, VA 22314-2902
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/24/2024	Payee name Cothran, Kathy
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Amount (\$) \$850.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1109 Bit Ln Cedar Park, TX 78613-1486
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/13/2024	Payee name Cothran, Kathy
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Amount (\$) \$297.50 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1109 Bit Ln Cedar Park, TX 78613-1486
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 07/08/2024	5 Payee name Dallas Morning News
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6 Amount (\$) \$32.51	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109-5210
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/08/2024	Payee name Dallas Morning News
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Amount (\$) \$32.51	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109-5210
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/09/2024	Payee name Dallas Morning News
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Amount (\$) \$32.51	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109-5210
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 08/19/2024	5 Payee name Deluxe
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6 Amount (\$) \$189.34	7 Payee address; City; State; Zip Code 801 Marquette Ave Minneapolis, MN 55402-2807
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/15/2024	Payee name Deluxe
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Amount (\$) \$299.20	Payee address; City; State; Zip Code 801 Marquette Ave Minneapolis, MN 55402-2807
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/01/2024	Payee name Dropbox
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Amount (\$) \$223.86	Payee address; City; State; Zip Code 1800 Owens St San Francisco, CA 94158-2381
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online File Storage
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 08/01/2024	5 Payee name Dropbox
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6 Amount (\$) \$223.86	7 Payee address; City; State; Zip Code 1800 Owens St San Francisco, CA 94158-2381
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online File Storage
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/01/2024	Payee name Dropbox
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Amount (\$) \$223.86	Payee address; City; State; Zip Code 1800 Owens St San Francisco, CA 94158-2381
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online File Storage
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/09/2024	Payee name Erben & Yarbrough
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Amount (\$) \$2,750.00	Payee address; City; State; Zip Code 807 Brazos St Ste 402 Austin, TX 78701-2508
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance Legal Services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/18/2024	5 Payee name FedEx Office	
6 Amount (\$) \$32.95 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5121 Quince Rd Memphis, TN 38117-6846	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Postage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/23/2024	Payee name Flipsnack	
Amount (\$) \$48.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 535 Mission St Fl 14 San Francisco, CA 94105-3253	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/23/2024	Payee name Flipsnack	
Amount (\$) \$48.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 535 Mission St Fl 14 San Francisco, CA 94105-3253	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/23/2024	5 Payee name Flipsnack	
6 Amount (\$) \$48.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 535 Mission St Fl 14 San Francisco, CA 94105-3253	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/01/2024	Candidate/Officeholder name Office sought Office held	
Payee name Galaxy Cafe		
6 Amount (\$) \$47.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1000 W Lynn St Austin, TX 78703-3949	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/23/2024	Candidate/Officeholder name Office sought Office held	
Payee name Galaxy Cafe		
6 Amount (\$) \$36.35 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1000 W Lynn St Austin, TX 78703-3949	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/12/2024	5 Payee name George Bush Intercontinental Airport
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6 Amount (\$) \$44.50	7 Payee address; City; State; Zip Code 2800 N Terminal Rd Houston, TX 77032-5569
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/20/2024	Payee name GoDaddy Operating Company, LLC
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Amount (\$) \$36.16	Payee address; City; State; Zip Code 14455 N Hayden Rd Ste 226 Scottsdale, AZ 85260-6993
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web Domain
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/26/2024	Payee name HEB
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Amount (\$) \$29.08	Payee address; City; State; Zip Code 2301 S Congress Ave Austin, TX 78704-5253
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555			
4 Date 09/26/2024	5 Payee name HSA Bank				
6 Amount (\$) \$1.75	7 Payee address; City; State; Zip Code Po Box 939 Sheboygan, WI 53082-0939				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Account Maintenance Fee			
	<table style="width:100%; border: none;"> <tr> <td style="width:25%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border: none;">Candidate/Officeholder name</td> <td style="width:25%; border: none;">Office sought</td> <td style="width:25%; border: none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 08/27/2024	Payee name HSA Bank				
Amount (\$) \$1.75	Payee address; City; State; Zip Code Po Box 939 Sheboygan, WI 53082-0939				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Account Maintenance Fee			
	<table style="width:100%; border: none;"> <tr> <td style="width:25%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border: none;">Candidate/Officeholder name</td> <td style="width:25%; border: none;">Office sought</td> <td style="width:25%; border: none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 08/27/2024	Payee name HSA Bank				
Amount (\$) \$135.00	Payee address; City; State; Zip Code Po Box 939 Sheboygan, WI 53082-0939				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Employee HSA Contributions			
	<table style="width:100%; border: none;"> <tr> <td style="width:25%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border: none;">Candidate/Officeholder name</td> <td style="width:25%; border: none;">Office sought</td> <td style="width:25%; border: none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 08/27/2024	5 Payee name HSA Bank	
6 Amount (\$) \$225.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code Po Box 939 Sheboygan, WI 53082-0939	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Employee HSA Contributions
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/29/2024	Payee name HSA Bank	
Amount (\$) \$135.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Po Box 939 Sheboygan, WI 53082-0939	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Employee HSA Contributions
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/29/2024	Payee name HSA Bank	
Amount (\$) \$225.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Po Box 939 Sheboygan, WI 53082-0939	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Employee HSA Contributions
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 26/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 07/03/2024	5 Payee name Hill Country Springs
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6 Amount (\$) \$10.83	7 Payee address; City; State; Zip Code PO Box 2220 Manchaca, TX 78652-2220
<input checked="" type="checkbox"/> Expenditure from corporate funds	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/08/2024	Payee name Hill Country Springs
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Amount (\$) \$10.83	Payee address; City; State; Zip Code PO Box 2220 Manchaca, TX 78652-2220
<input checked="" type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/08/2024	Payee name Hill Country Springs
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Amount (\$) \$47.82	Payee address; City; State; Zip Code PO Box 2220 Manchaca, TX 78652-2220
<input checked="" type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 27/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/09/2024	5 Payee name Hill Country Springs
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6 Amount (\$) \$69.48	7 Payee address; City; State; Zip Code PO Box 2220 Manchaca, TX 78652-2220
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/18/2024	Payee name Hill Country Springs
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Amount (\$) \$22.32	Payee address; City; State; Zip Code PO Box 2220 Manchaca, TX 78652-2220
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/16/2024	Payee name Holtzman Vogel Baran Torchinsky & Joseflak PLLC
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Amount (\$) \$642.50	Payee address; City; State; Zip Code 15405 John Marshall Hwy Haymarket, VA 20169-2706
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance Legal Services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 28/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/25/2024	5 Payee name Hopdoddy Burger Bar
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6 Amount (\$) \$77.93	7 Payee address; City; State; Zip Code 1011 E 5th St Austin, TX 78702-3996
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/07/2024	Payee name Houston Chronicle
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Amount (\$) \$27.72	Payee address; City; State; Zip Code 4747 Southwest Fwy Houston, TX 77027-6901
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/04/2024	Payee name Houston Chronicle
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Amount (\$) \$27.72	Payee address; City; State; Zip Code 4747 Southwest Fwy Houston, TX 77027-6901
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 29/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/01/2024	5 Payee name Houston Chronicle
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6 Amount (\$) \$27.72	7 Payee address; City; State; Zip Code 4747 Southwest Fwy Houston, TX 77027-6901
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/27/2024	Payee name Hunt Oil
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Amount (\$) \$5.00	Payee address; City; State; Zip Code 1900 N Akard St Dallas, TX 75201-2729
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/06/2024	Payee name Intuit Inc
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Amount (\$) \$1,034.02	Payee address; City; State; Zip Code 2800 E Commerce Center Pl Tucson, AZ 85706-4559
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Accounting Software
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 30/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/09/2024	5 Payee name JRP Advisory
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6 Amount (\$) \$3,315.16	7 Payee address; City; State; Zip Code 2288 Savannah Ln Lexington, KY 40513-1749
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/09/2024	Payee name JRP Advisory
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Amount (\$) \$1,136.62	Payee address; City; State; Zip Code 2288 Savannah Ln Lexington, KY 40513-1749
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Board Meeting Briefing Books
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/09/2024	Payee name Jordan, Anne
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Amount (\$) \$218.42	Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage at \$.67 per mile
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 31/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 07/31/2024	5 Payee name Jordan, Anne
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6 Amount (\$) \$3,375.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/31/2024	Payee name Jordan, Anne
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Amount (\$) \$3,375.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Administrative Payroll
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/30/2024	Payee name Jordan, Anne
--------------------	----------------------------

Amount (\$) \$3,375.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 32/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
--	--	--

4 Date 08/30/2024	5 Payee name Jordan, Anne
-----------------------------	-------------------------------------

6 Amount (\$) \$3,375.00	7 Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Administrative Payroll
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/18/2024	Payee name KAP Print LLC
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Amount (\$) \$14,894.09	Payee address; City; State; Zip Code 220 Quinn Dr Dripping Springs, TX 78620-5109
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/19/2024	Payee name KAP Print LLC
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Amount (\$) \$15,821.39	Payee address; City; State; Zip Code 220 Quinn Dr Dripping Springs, TX 78620-5109
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 33/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/19/2024	5 Payee name KAP Print LLC
-----------------------------	--------------------------------------

6 Amount (\$) \$15,821.39 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 220 Quinn Dr Dripping Springs, TX 78620-5109
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/19/2024	Payee name KAP Print LLC
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Amount (\$) \$7,772.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 220 Quinn Dr Dripping Springs, TX 78620-5109
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/19/2024	Payee name KAP Print LLC
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Amount (\$) \$2,918.18 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 220 Quinn Dr Dripping Springs, TX 78620-5109
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Push Cards
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 34/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/24/2024	5 Payee name KAP Print LLC
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6 Amount (\$) \$7,772.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 220 Quinn Dr Dripping Springs, TX 78620-5109
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailers
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/10/2024	Payee name KC Strategies, LLC
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Amount (\$) \$15,405.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/18/2024	Payee name KC Strategies, LLC
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Amount (\$) \$15,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 35/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/24/2024	5 Payee name KC Strategies, LLC	
6 Amount (\$) \$15,625.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin, TX 78731-3064	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2024	Payee name Keel Systems LLC	
Amount (\$) \$599.75 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 23812 Tres Coronas Spicewood, TX 78669-1631	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance Accounting Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/08/2024	Payee name Keel Systems LLC	
Amount (\$) \$599.75 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 23812 Tres Coronas Spicewood, TX 78669-1631	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance Accounting Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 36/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/05/2024	5 Payee name Keel Systems LLC
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6 Amount (\$) \$3,099.75	7 Payee address; City; State; Zip Code 23812 Tres Coronas Spicewood, TX 78669-1631
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance Accounting Expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/03/2024	Payee name LHP + Company, Inc.
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Amount (\$) \$3,750.00	Payee address; City; State; Zip Code PO Box 29382 Austin, TX 78755-6382
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supervision Services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/03/2024	Payee name LHP + Company, Inc.
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Amount (\$) \$3,750.00	Payee address; City; State; Zip Code PO Box 29382 Austin, TX 78755-6382
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Consulting Services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 37/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
--	--	--

4 Date 08/08/2024	5 Payee name LHP + Company, Inc.
-----------------------------	--

6 Amount (\$) \$3,750.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 29382 Austin, TX 78755-6382
---	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Consulting Services
---------------------------------	---	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/08/2024	Payee name LHP + Company, Inc.
--------------------	-----------------------------------

Amount (\$) \$3,750.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 29382 Austin, TX 78755-6382
---	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supervision Services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/24/2024	Payee name Leon Strategies
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Amount (\$) \$687.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Text Messaging
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 38/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/19/2024	5 Payee name Leon Strategies
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6 Amount (\$) \$6,260.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Text Messaging
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/19/2024	Payee name Leon Strategies
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Amount (\$) \$2,327.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2012 Bear Creek Dr Leander, TX 78641-4470
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Text Messaging
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/27/2024	Payee name McWright, Jamie
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Amount (\$) \$267.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage at \$.67 per mile
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 39/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 07/31/2024	5 Payee name McWright, Jamie
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6 Amount (\$) \$18,281.25	7 Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/31/2024	Payee name McWright, Jamie
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Amount (\$) \$6,093.75	Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Management Payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/30/2024	Payee name McWright, Jamie
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Amount (\$) \$18,281.25	Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 40/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 08/30/2024	5 Payee name McWright, Jamie
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6 Amount (\$) \$6,093.75	7 Payee address; City; State; Zip Code 807 Brazos St Ste 601 Austin, TX 78701-2526
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Management Payroll
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/26/2024	Payee name Mi Pueblo
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Amount (\$) \$35.76	Payee address; City; State; Zip Code 500 S Main St Belton, TX 76513-3462
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/14/2024	Payee name Microsoft
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Amount (\$) \$13.54	Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052-8300
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 41/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555			
4 Date 09/13/2024	5 Payee name Microsoft				
6 Amount (\$) \$13.54	7 Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052-8300				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software			
	<table style="width:100%; border: none;"> <tr> <td style="width:25%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border: none;">Candidate/Officeholder name</td> <td style="width:25%; border: none;">Office sought</td> <td style="width:20%; border: none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 08/13/2024	Payee name Microsoft				
Amount (\$) \$13.54	Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052-8300				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software			
	<table style="width:100%; border: none;"> <tr> <td style="width:25%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border: none;">Candidate/Officeholder name</td> <td style="width:25%; border: none;">Office sought</td> <td style="width:20%; border: none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 09/03/2024	Payee name Microsoft				
Amount (\$) \$10.72	Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052-8300				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software			
	<table style="width:100%; border: none;"> <tr> <td style="width:25%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border: none;">Candidate/Officeholder name</td> <td style="width:25%; border: none;">Office sought</td> <td style="width:20%; border: none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 42/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 07/24/2024	5 Payee name Murphy Nasica	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Polling and Research
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/19/2024	Payee name Murphy Nasica	
Amount (\$) \$23,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/19/2024	Payee name Murphy Nasica	
Amount (\$) \$48,743.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Po Box 1648 Austin, TX 78767-1648	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Canvassing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
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Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 43/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/17/2024	5 Payee name Office Depot
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6 Amount (\$) \$756.93	7 Payee address; City; State; Zip Code 907 W 5th St Austin, TX 78703-5426
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/17/2024	Payee name Omni Austin Hotel Downtown
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Amount (\$) \$657.20	Payee address; City; State; Zip Code 700 San Jacinto Austin, TX 78701-3231
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meeting Room Rental
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/13/2024	Payee name PGA Tour Grill
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Amount (\$) \$10.81	Payee address; City; State; Zip Code 6701 Convair Rd El Paso, TX 79925-1099
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 44/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/12/2024	5 Payee name Paradies Lagardere	
6 Amount (\$) \$3.99 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3600 Presidential Blvd Austin, TX 78719-2363	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/13/2024	Payee name Paradies Lagardere	
Amount (\$) \$10.52 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6701 Convair Rd El Paso, TX 79925-1099	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/12/2024	Payee name Paradies Lagardere	
Amount (\$) \$3.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3600 Presidential Blvd Austin, TX 78719-2363	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 45/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/13/2024	5 Payee name Paradies Lagardere
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6 Amount (\$) \$8.85	7 Payee address; City; State; Zip Code 6701 Convair Rd El Paso, TX 79925-1099
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/16/2024	Payee name Paychex
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Amount (\$) \$170.00	Payee address; City; State; Zip Code 911 Panorama Trl S Rochester, NY 14625-2311
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Processing Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/13/2024	Payee name Paychex
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Amount (\$) \$170.00	Payee address; City; State; Zip Code 911 Panorama Trl S Rochester, NY 14625-2311
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Processing Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 46/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555			
4 Date 07/12/2024	5 Payee name Paychex				
6 Amount (\$) \$170.00	7 Payee address; City; State; Zip Code 911 Panorama Trl S Rochester, NY 14625-2311				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Processing Fees			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate/Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 08/30/2024	Payee name Paychex				
Amount (\$) \$1,450.52	Payee address; City; State; Zip Code 911 Panorama Trl S Rochester, NY 14625-2311				
<input type="checkbox"/> Expenditure from corporate funds					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate/Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 07/31/2024	Payee name Paychex				
Amount (\$) \$2,699.82	Payee address; City; State; Zip Code 911 Panorama Trl S Rochester, NY 14625-2311				
<input type="checkbox"/> Expenditure from corporate funds					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate/Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 47/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 08/30/2024	5 Payee name Paychex
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6 Amount (\$) \$292.64	7 Payee address; City; State; Zip Code 911 Panorama Trl S Rochester, NY 14625-2311
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Processing Fees
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/31/2024	Payee name Paychex
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Amount (\$) \$261.82	Payee address; City; State; Zip Code 911 Panorama Trl S Rochester, NY 14625-2311
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/26/2024	Payee name Poolhouse Agency LLC
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Amount (\$) \$71,340.00	Payee address; City; State; Zip Code 23 W Broad St Ste 200 Richmond, VA 23220-4295
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 48/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 08/27/2024	5 Payee name Potbelly Sandwich	
6 Amount (\$) \$12.16 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 222 McKinney Trl Fate, TX 75087-9266	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/13/2024	Payee name Ragnar Research Partners	
Amount (\$) \$24,600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 103 E St SE Washington, DC 20003-2615	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Polling and Research
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/13/2024	Payee name Sabor Bar	
Amount (\$) \$179.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10 Henry Trost Ct El Paso, TX 79901-1154	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 49/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 07/22/2024	5 Payee name San Antonio Express News
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6 Amount (\$) \$27.72	7 Payee address; City; State; Zip Code 301 Avenue E San Antonio, TX 78205-2006
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/19/2024	Payee name San Antonio Express News
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Amount (\$) \$27.72	Payee address; City; State; Zip Code 301 Avenue E San Antonio, TX 78205-2006
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/16/2024	Payee name San Antonio Express News
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Amount (\$) \$27.72	Payee address; City; State; Zip Code 301 Avenue E San Antonio, TX 78205-2006
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 50/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 08/13/2024	5 Payee name Sir Speedy	
6 Amount (\$) \$3,285.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1320 Arrow Point Dr Ste 410 Cedar Park, TX 78613-2095	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Event Postage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2024	Payee name Sir Speedy	
Amount (\$) \$6,089.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1320 Arrow Point Dr Ste 410 Cedar Park, TX 78613-2095	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Event Invitations
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2024	Payee name Sir Speedy	
Amount (\$) \$8,608.16 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1320 Arrow Point Dr Ste 410 Cedar Park, TX 78613-2095	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Letters Postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 51/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/09/2024	5 Payee name Sir Speedy
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6 Amount (\$) \$2,123.57 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1320 Arrow Point Dr Ste 410 Cedar Park, TX 78613-2095
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Event Postage
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/12/2024	Payee name Sir Speedy
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Amount (\$) \$12,743.15 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1320 Arrow Point Dr Ste 410 Cedar Park, TX 78613-2095
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Letters
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/18/2024	Payee name Sir Speedy
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Amount (\$) \$4,459.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1320 Arrow Point Dr Ste 410 Cedar Park, TX 78613-2095
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Event Invitations
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 52/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/18/2024	5 Payee name Sir Speedy	
6 Amount (\$) \$406.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1320 Arrow Point Dr Ste 410 Cedar Park, TX 78613-2095	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Event Postage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2024	Payee name Sir Speedy	
Amount (\$) \$6,616.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1320 Arrow Point Dr Ste 410 Cedar Park, TX 78613-2095	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Event Postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/13/2024	Payee name Slice	
Amount (\$) \$4.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6701 Convair Rd El Paso, TX 79925-1099	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 53/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 08/29/2024	5 Payee name Southwest Airlines	
6 Amount (\$) \$415.95 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2702 Love Field Dr Dallas, TX 75235-1908	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight to attend political reception
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2024	Payee name Southwest Airlines	
Amount (\$) \$415.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2702 Love Field Dr Dallas, TX 75235-1908	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight to attend political reception
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/13/2024	Payee name Southwest Airlines	
Amount (\$) \$8.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2702 Love Field Dr Dallas, TX 75235-1908	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In Flight Wifi
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 54/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 08/13/2024	5 Payee name Southwest Airlines
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6 Amount (\$) \$334.96 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2702 Love Field Dr Dallas, TX 75235-1908
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight to attend political reception
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/13/2024	Payee name Southwest Airlines
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Amount (\$) \$8.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2702 Love Field Dr Dallas, TX 75235-1908
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In Flight Wifi
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/12/2024	Payee name Southwest Airlines
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Amount (\$) \$8.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2702 Love Field Dr Dallas, TX 75235-1908
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In Flight Wifi
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 55/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/13/2024	5 Payee name Southwest Airlines	
6 Amount (\$) \$8.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2702 Love Field Dr Dallas, TX 75235-1908	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In Flight Wifi
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/24/2024	Payee name Southwest Airlines	
Amount (\$) \$390.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2702 Love Field Dr Dallas, TX 75235-1908	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight to attend political reception
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/24/2024	Payee name Southwest Airlines	
Amount (\$) \$430.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2702 Love Field Dr Dallas, TX 75235-1908	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight to attend political reception
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 56/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/26/2024	5 Payee name Southwest Airlines	
6 Amount (\$) \$491.96 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2702 Love Field Dr Dallas, TX 75235-1908	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight to attend political reception
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/26/2024	Payee name Southwest Airlines	
Amount (\$) \$491.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2702 Love Field Dr Dallas, TX 75235-1908	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight to attend political reception
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2024	Payee name Southwest Airlines	
Amount (\$) \$579.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2702 Love Field Dr Dallas, TX 75235-1908	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight to attend political reception
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 57/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 07/03/2024	5 Payee name Tankersley, Kate	
6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 41964 Houston, TX 77241-1964	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Consultant Services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/24/2024	Payee name Tankersley, Kate	
Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 41964 Houston, TX 77241-1964	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Consultant Services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/20/2024	Payee name Tankersley, Kate	
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 41964 Houston, TX 77241-1964	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Consultant Services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 58/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/12/2024	5 Payee name Tankersley, Kate
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6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code PO Box 41964 Houston, TX 77241-1964
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Consultant Services
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/25/2024	Payee name Texas Mutual Insurance Company
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Amount (\$) \$912.00	Payee address; City; State; Zip Code PO Box 841843 Dallas, TX 75284-1843
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Insurance
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/24/2024	Payee name The Lukens Company
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Amount (\$) \$20,000.20	Payee address; City; State; Zip Code 1775 Bellingham Dr Troy, MI 48083-2056
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 59/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/24/2024	5 Payee name The Lukens Company
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6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1775 Bellingham Dr Troy, MI 48083-2056
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Digital Advertising
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/29/2024	Payee name The Plaza at Pioneer Park
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Amount (\$) \$257.47 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 106 W Mills Ave El Paso, TX 79901-1338
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/28/2024	Payee name The Plaza at Pioneer Park
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Amount (\$) \$278.15 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 106 W Mills Ave El Paso, TX 79901-1338
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 60/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/13/2024	5 Payee name The Plaza at Pioneer Park
-----------------------------	--

6 Amount (\$) \$435.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 106 W Mills Ave El Paso, TX 79901-1338
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/12/2024	Payee name The Plaza at Pioneer Park
--------------------	---

Amount (\$) \$244.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 106 W Mills Ave El Paso, TX 79901-1338
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/13/2024	Payee name The Plaza at Pioneer Park
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Amount (\$) \$32.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 106 W Mills Ave El Paso, TX 79901-1338
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 61/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/13/2024	5 Payee name The Plaza at Pioneer Park
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6 Amount (\$) \$43.23 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 106 W Mills Ave El Paso, TX 79901-1338
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/13/2024	Payee name The Plaza at Pioneer Park
--------------------	---

Amount (\$) \$257.47 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 106 W Mills Ave El Paso, TX 79901-1338
--	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/25/2024	Payee name The Wall Street Journal
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Amount (\$) \$42.21 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1155 Ave Of The Americas New York, NY 10036
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 62/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 09/18/2024	5 Payee name The Wall Street Journal
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6 Amount (\$) \$42.21	7 Payee address; City; State; Zip Code 1155 Ave Of The Americas New York, NY 10036
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/22/2024	Payee name The Wall Street Journal
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Amount (\$) \$42.21	Payee address; City; State; Zip Code 1155 Ave Of The Americas New York, NY 10036
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/01/2024	Payee name The Washington Post
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Amount (\$) \$127.92	Payee address; City; State; Zip Code 1301 K St Nw Washington, DC 20005-3317
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 63/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 07/01/2024	5 Payee name Uber
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6 Amount (\$) \$8.72	7 Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103-1331
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ground Transportation
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/01/2024	Payee name Uber
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Amount (\$) \$15.91	Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103-1331
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ground Transportation
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/13/2024	Payee name Uber
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Amount (\$) \$15.03	Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103-1331
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ground Transportation
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 64/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 09/13/2024	5 Payee name Uber	
6 Amount (\$) \$17.93 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103-1331	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ground Transportation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/12/2024	Payee name Uber	
Amount (\$) \$30.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103-1331	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ground Transportation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/20/2024	Payee name United Airlines	
Amount (\$) \$492.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 233 S Wacker Dr Chicago, IL 60606-7147	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight to attend political reception
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 65/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
4 Date 07/01/2024	5 Payee name Vast Conference	
6 Amount (\$) \$26.28	7 Payee address; City; State; Zip Code 2770 Arapahoe Rd #132-127 Lafayette, CO 80026	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/01/2024	Payee name Vast Conference	
Amount (\$) \$26.28	Payee address; City; State; Zip Code 2770 Arapahoe Rd #132-127 Lafayette, CO 80026	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Vast Conference	
Amount (\$) \$26.28	Payee address; City; State; Zip Code 2770 Arapahoe Rd #132-127 Lafayette, CO 80026	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telecommunications
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 66/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555			
4 Date 07/09/2024	5 Payee name Vipre Security				
6 Amount (\$) \$60.50	7 Payee address; City; State; Zip Code PO Box 50826 Los Angeles, CA 90074-0826				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Hosting Services			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%;">Candidate/Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 08/08/2024	Payee name Vipre Security				
Amount (\$) \$60.50	Payee address; City; State; Zip Code PO Box 50826 Los Angeles, CA 90074-0826				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Hosting Services			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%;">Candidate/Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 09/09/2024	Payee name Vipre Security				
Amount (\$) \$60.50	Payee address; City; State; Zip Code PO Box 50826 Los Angeles, CA 90074-0826				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Hosting Services			
	<table style="width:100%; border:none;"> <tr> <td style="width:25%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%;">Candidate/Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 67/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 07/01/2024	5 Payee name WinRed Technical Services LLC
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6 Amount (\$) \$3,662.41 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1776 Wilson Blvd Ste 530 Arlington, VA 22209-2517
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees 7/1/24-9/26/24
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/12/2024	Payee name Zoom Video Communications, Inc
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Amount (\$) \$17.05 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd San Jose, CA 95113-1608
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Conference Call Services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/12/2024	Payee name Zoom Video Communications, Inc
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Amount (\$) \$17.05 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd San Jose, CA 95113-1608
--	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Conference Call Services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 68/68 Rpt:	2 FILER NAME Associated Republicans of Texas Campaign Fund	3 Filer ID (Ethics Commission Filers) 00015555
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4 Date 08/12/2024	5 Payee name Zoom Video Communications, Inc
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6 Amount (\$) \$17.05	7 Payee address; City; State; Zip Code 55 Almaden Blvd San Jose, CA 95113-1608
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Conference Call Services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/29/2024	Payee name goFish Advertising
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Amount (\$) \$216.50	Payee address; City; State; Zip Code 19315 Fm 2252 Ste 312 Garden Ridge, TX 78266-2553
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Letters
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/25/2024	Payee name goFish Advertising
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Amount (\$) \$263.86	Payee address; City; State; Zip Code 19315 Fm 2252 Ste 312 Garden Ridge, TX 78266-2553
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Event Invitations
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 104/104
2 FILER NAME Associated Republicans of Texas Campaign Fund		3 Filer ID (Ethics Commission Filers) 00015555
4 Date 07/03/2024	5 Name of person from whom amount is received Frost Bank <hr/> 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78205-1414	8 Amount (\$) \$0.41
7 Purpose for which amount is received IOD Interest Payment <input type="checkbox"/> Check if political contribution returned to filer		
Date 07/31/2024	Name of person from whom amount is received Susser Bank <hr/> Address of person from whom amount is received; City; State; Zip Code Arlington, TX 76015	Amount (\$) \$487.96
Purpose for which amount is received IOD Interest Payment <input type="checkbox"/> Check if political contribution returned to filer		
Date 08/31/2024	Name of person from whom amount is received Susser Bank <hr/> Address of person from whom amount is received; City; State; Zip Code Arlington, TX 76015	Amount (\$) \$367.14
Purpose for which amount is received IOD Interest Payment <input type="checkbox"/> Check if political contribution returned to filer		