FORM CEC **COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The CEC Instruction Guide explains how to complete this form. 00035364 3 COMMITTEE NAME **OFFICE USE ONLY** Grayson County Republican Party (CEC) Date Received **ELECTRONICALLY FILED** 10/06/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 3122 Date Hand-delivered or Date Postmarked Change of Address Sherman, TX 75091 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Shawn D. NAME NICKNAME LAST **SUFFIX** Nesmith STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 701 Mohawk Drive STREET **ADDRESS** (Residence or Business) Tioga, TX 76271 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 701 Mohawk Drive MAILING **ADDRESS** Tioga, TX 76271 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (972) 251-3058 PHONE REPORT January 15 30th day before election Final Report X **TYPE** 10th day after campaign treasurer 8th day before election July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2024 09/26/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Runoff Other Primary 11/05/2024 χ General Special **GO TO PAGE 2**

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME		13 Filer ID	(Ethics Commission Filers)				
Grayson County Republican Party	(CEC)	000353	00035364				
14 COMMITTEE 1. Candida (Identify by nam applicable, class	ne or, if	I					
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed						
2. Measure (Describe by da location of elect nature of issue:	ate and tion and						
3. Officeho Assisted (Identify by nam applicable, clas	ne or, if						
TOTALS PLEDGE CONTRI	UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER T ES, LOANS, OR GUARANTEES OF LOANS, OR IBUTIONS MADE ELECTRONICALLY) re if this report qualifies for the higher itemization threshold	THAN \$	0.00				
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)						
EXPENDITURE 3. TOTAL 1 TOTALS	UNITEMIZED POLITICAL EXPENDITURES	\$	0.00				
4. TOTAL	POLITICAL EXPENDITURES	\$	11,837.44				
	POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE REPORTING PERIOD	E LAST DAY \$	83,371.56				
	PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AY OF THE REPORTING PERIOD	AS OF THE \$	0.00				
16 AFFIDAVIT		<u> </u>					
	I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information requ					
	S	Shawn D. Nesmith	1				
	Signatu	re of Campaign Tre	easurer				
AFFIX NOTARY STAMP / SE	EAL ABOVE						
Sworn to and subscribed before me, b	y the said	, this the	day				
	_, to certify which, witness my hand and seal of office.						
Signature of officer administering or	ath Printed name of officer administering oath	Title of	officer administering oath				

SUBTOTALS - CEC FORM CEC **COVER SHEET PG 3** 17 COMMITTEE NAME 18 Filer ID (Ethics Commission Filers) Grayson County Republican Party (CEC) 00035364 19 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 6,683.21 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS 3. \$ SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11,837.44 \$

6.

7.

8.

10.

TO FILER

SCHEDULE F2: UNPAID INCURRED OBLIGATIONS

SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS

SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED

\$

\$

\$

\$

\$

	MONET	ARY POLITICAL CON		SCHEDULE	■ A1		
	The Instru	ction Guide explains how to co	mplete this form	n.	1	Total pages Schedule A1: Sch: 1/35 Rpt: 4/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	Filers)
4	Date 09/23/2024	 Full name of contributor out- ADAMS, RON Contributor address; City; State; Zip)	7	Amount of Contribution (\$)	\$20.00
_		SHERMAN, TX 75092	- Ia	5 1 (6 1 1 1			
8	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED)		
	Date 09/23/2024	Full name of contributor	of-state PAC (ID#: Code			Amount of Contribution (\$)	\$25.00
	Dringinal occu	SHERMAN, TX 75092		Employer (See Instructions			
	RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED)		
	Date 09/23/2024	Full name of contributor	of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
		SHERMAN, TX 75090					
	Principal occu N/A	pation / Job title (See Instructions)		Employer (See Instructions N/A)		
	Date 09/23/2024	ANDERSON, KEVIN Contributor address; City; State; Zip				Amount of Contribution (\$)	\$10.00
	Principal occu SWITCH TE	PLANO, TX 75047 pation / Job title (See Instructions) CH		Employer (See Instructions)		
	Date 09/23/2024	ARTHUR, SUSAN	of-state PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu PRINCIPAL	pation / Job title (See Instructions)		Employer (See Instructions)		
			1				

			SCHEDULE A			
The Instruc	ction Guide explains how	to complete this form	m.	1	Total pages Schedule A1: Sch: 2/35 Rpt: 5/54	
2 FILER NAME Gravson Cou	unty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	Filers)
4 Date 08/19/2024	Full name of contributor BACKUS, KENNY Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$20.00
	CLARKSVILLE, TX 75426					
8 Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions) RETIRED)		
Date 09/23/2024	Full name of contributor BAILEY, CLIFTON Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$10.00
	COLLINSVILLE, TX 76233					
Principal occu DISABLED	pation / Job title (See Instructions)		Employer (See Instructions DISABLED)		
Date 09/23/2024	Full name of contributor BARKS, DON Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code			Amount of Contribution (\$)	\$20.00
	SHERMAN, TX 75090					
Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED)		
Date 08/19/2024	Full name of contributor BARNETT, CLAY Contributor address; City; Sta)		Amount of Contribution (\$)	\$10.00
Principal occu	SHERMAN, TX 75092 pation / Job title (See Instructions)		Employer (See Instructions)		
Date 09/23/2024	Full name of contributor BARNETT, CLAY Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$20.00
Deire de et e e e	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE	A1		
	The Instru	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 3/35 Rpt: 6/54	
2	FILER NAME Grayson Cou	ınty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	Filers)
4	Date 08/19/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$20.00
_		SHERMAN, TX 75092	_	5 1 (0 1 1 1			
8	Principal occu RETIRED	pation / Job title (See Instructions)	9	Employer (See Instructions RETIRED	5)		
	Date 09/09/2024	Full name of contributor)		Amount of Contribution (\$)	\$70.00
	Principal occu	SHERMAN, TX 75090 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	N/A			N/A	,		
	Date 08/19/2024	Full name of contributor)		Amount of Contribution (\$)	\$40.00
		VAN ALSTYNE, TX 75495					
	Principal occu MOM	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_BELL, MARCHELLE Contributor address; City; State; Zip Code VAN ALSTYNE, TX 75495)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>(</u>		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_ BENNETT, TYRON Contributor address; City; State; Zip Code SHERMAN, TX 75092				Amount of Contribution (\$)	\$10.00
	Principal occu SELF	pation / Job title (See Instructions)		Employer (See Instructions	5)		
		<u>'</u>					

	MONET	ARY POLITICAL (SCHEDULE	■ A1			
	The Instru	ction Guide explains hov	v to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 4/35 Rpt: 7/54	
2	FILER NAME Grayson Co	unty Republican Party (CEC)				3	Filer ID (Ethics Commission 00035364	Filers)
4	Date 08/30/2024	5 Full name of contributor BINGHAM, TONYA6 Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code)	7	Amount of Contribution (\$)	\$10.00
_		SHERMAN, TX 75090		_				
8	N/A	pation / Job title (See Instruction:	5)	9	Employer (See Instructions N/A	5)		
	Date 09/23/2024	Full name of contributor BIRCHLER, BRYANT Contributor address; City; S)		Amount of Contribution (\$)	\$10.00
		SHERMAN, TX 75092				<u> </u>		
	CENTRAL T	pation / Job title (See Instruction: RANSPORT	5)		Employer (See Instructions	5)		
	Date 09/23/2024	Full name of contributor BIRCHLES, MINELLE Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$10.00
		SHERMAN, TX 75092						
	Principal occu RETIRED	pation / Job title (See Instruction:	5)		Employer (See Instructions RETIRED	5)		
	Date 09/23/2024	Full name of contributor BLAKEY, JAN Contributor address; City; S SHERMAN, TX 75090)		Amount of Contribution (\$)	\$10.00
	Principal occu RETIRED	pation / Job title (See Instruction:	5)		Employer (See Instructions	<u> </u>		
	Date 08/19/2024	Full name of contributor BOLT, BILLY Contributor address; City; S SOUTHMAYD, TX 76268					Amount of Contribution (\$)	\$20.00
	Principal occu SHEET MET	pation / Job title (See Instruction: AL	5)		Employer (See Instructions	5)		
				1				

	MONET	ARY POLITICAL CONTRIBU	TIONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete th	his form.	1 Total pages Schedule A1: Sch: 5/35 Rpt: 8/54
2	FILER NAME Grayson Cou	ınty Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4	Date 09/09/2024	 Full name of contributor out-of-state PAC BOWLING, JOHN Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$25.00
		WHITESBORO, TX 76273		
8	Principal occu RETIRED	pation / Job title (See Instructions)	9 Employer (See Instructions) RETIRED)
	Date 09/23/2024	Full name of contributor out-of-state PAC BRINKERHOFF, STEVE Contributor address; City; State; Zip Code	(ID#:)	Amount of Contribution (\$) \$20.00
	Principal occu	DENISON, TX 75020 pation / Job title (See Instructions)	Employer (See Instructions)
	RETIRED		RETIRED	
	Date 09/06/2024	Full name of contributor out-of-state PAC BROWN, JOE Contributor address; City; State; Zip Code	(ID#:)	Amount of Contribution (\$) \$500.00
		SHERMAN, TX 75092		
	Principal occu ATTORNEY	oation / Job title (See Instructions)	Employer (See Instructions)	
	Date 09/23/2024	Full name of contributor out-of-state PAC BROWN, RUTH Contributor address; City; State; Zip Code BELLS, TX 75414	(ID#:)	Amount of Contribution (\$) \$60.00
	Principal occu RETIRED	oation / Job title (See Instructions)	Employer (See Instructions)	
	Date 08/19/2024	Full name of contributor out-of-state PAC BURRIS, CHRIS Contributor address; City; State; Zip Code DENISON, TX 75020	(ID#:)	Amount of Contribution (\$) \$60.00
	Principal occu DRIVER	pation / Job title (See Instructions)	Employer (See Instructions	
			•	

	MONET	ARY POLITICAL CO		SCHEDULE	■ A1		
	The Instruc	ction Guide explains how to	complete this forn	1.	1	Total pages Schedule A1: Sch: 6/35 Rpt: 9/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	Filers)
4	Date 09/23/2024	5 Full name of contributorBURRIS, CHRIS6 Contributor address; City; State	out-of-state PAC (ID#:;)	7	Amount of Contribution (\$)	\$60.00
		DENISON, TX 75020					
8	Principal occu DRIVER	pation / Job title (See Instructions)		Employer (See Instructions FED EX)		
	Date 09/23/2024	Full name of contributor BUSACK, WALLY Contributor address; City; State	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$20.00
	Principal occu	SHERMAN, TX 75090 pation / Job title (See Instructions)		Employer (See Instructions)		
	RETIRED	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		RETIRED	,		
	Date 09/23/2024	Full name of contributor CALLIES, MICHAEL Contributor address; City; State	out-of-state PAC (ID#:;			Amount of Contribution (\$)	\$20.00
		VAN ALSTYNE, TX 75495					
	Principal occu TRUCK DRI	pation / Job title (See Instructions) VER		Employer (See Instructions TYSON FOODS)		
	Date 09/23/2024	Full name of contributor CASSELLA, KATHY Contributor address; City; State TIOGA, TX 76271	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/23/2024	Full name of contributor CASTILLO, LEONORA Contributor address; City; State. POTTSBORO, TX 75076	out-of-state PAC (ID#:; Zip Code)		Amount of Contribution (\$)	\$20.00
	Principal occu REALTOR	pation / Job title (See Instructions)		Employer (See Instructions BETTERHOMES&GARI		NS	

	MONET	ARY POLITICAL CONTRIBUTI		SCHEDUL	E A1	
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 7/35 Rpt: 10/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)		3	Filer ID (Ethics Commission 00035364	n Filers)
4	Date 09/23/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$20.00
_		SHERMAN, TX 75090				
8	Principal occu OFFICE WO	pation / Job title (See Instructions) RKER	9 Employer (See Instructions	5)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#CAVANAUGH, SHERRY Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$20.00
	Principal occu	DENISON, TX 75021 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	RETIRED	pation / oob title (oce mondetions)	RETIRED	')		
	Date 08/19/2024	Full name of contributor	#:)		Amount of Contribution (\$)	\$10.00
	Principal occu	SHERMAN, TX 75090 pation / Job title (See Instructions)	Employer (See Instructions	·/_		
	MACHINE O	•	Employer (See mandenons	')		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID) CHICK, REGUE Contributor address; City; State; Zip Code DENISON, TX 75020	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu N/A	pation / Job title (See Instructions)	Employer (See Instructions N/A	<u> </u> 5)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID# COOPER, LAWRENCE Contributor address; City; State; Zip Code VAN ALSTYNE, TX 75495	#:)		Amount of Contribution (\$)	\$70.00
	Principal occu SELF	pation / Job title (See Instructions)	Employer (See Instructions SELF	<u>.</u> ;)		

	MONET	ARY POLITICAL (5		SCHEDUL	E A1		
	The Instru	ction Guide explains hov	to complete this for	rm	١.	1	Total pages Schedule A1: Sch: 8/35 Rpt: 11/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)				3	Filer ID (Ethics Commission 00035364	n Filers)
4	Date 08/20/2024	5 Full name of contributor COWAN, BILL6 Contributor address; City; S	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$200.00
		SHERMAN, TX 75092						
8	Principal occu RETIRED	pation / Job title (See Instructions	9		Employer (See Instructions RETIRED	s) 		
	Date 09/09/2024	Full name of contributor CROPP, MOLLY Contributor address; City; S	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$10.83
	Principal occu	SHERMAN, TX 75090 pation / Job title (See Instructions	5)		Employer (See Instructions	 - s)		
	N/A			ı	N/A			
	Date 09/23/2024	Full name of contributor CULBERT, CATHERINE Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code)		Amount of Contribution (\$)	\$10.00
		SHERMAN, TX 75092						
	Principal occu PUBLIC ASS	pation / Job title (See Instructions	5)		Employer (See Instructions DHS	5)		
	Date 08/19/2024	Full name of contributor CUPPS, JERMY Contributor address; City; S SHERMAN, TX 75090	out-of-state PAC (ID#:tate; Zip Code)		Amount of Contribution (\$)	\$5.00
	Principal occu RETIRED	pation / Job title (See Instructions	5)		Employer (See Instructions RETIRED	5)		
	Date 08/19/2024	Full name of contributor DAVIS, MELISSA Contributor address; City; S BELLS, TX 75414	out-of-state PAC (ID#:	••••)		Amount of Contribution (\$)	\$20.00
	Principal occu SUPERVISC	pation / Job title (See Instructions OR	5)		Employer (See Instructions	;)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/35 Rpt: 12/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)		3	Filer ID (Ethics Commission 00035364	Filers)
4	Date 09/23/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	DENISON, TX 75020 pation / Job title (See Instructions)	Employer (See Instructions)		
_	SELF		SELF	,		
	Date 09/23/2024	Full name of contributor			Amount of Contribution (\$)	\$20.00
	Principal occu	VAN ALSTYNE, TX 75495 pation / Job title (See Instructions)	Employer (See Instructions			
	COUNTY JU		GRAYSON COUNTY	,		
	Date 08/19/2024				Amount of Contribution (\$)	\$10.00
		COLLINSVILLE, TX 76233				
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_ DRAKE, KATHY Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
	Principal occu	POTTSBORO, TX 75076 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_DUNN, VANESSA Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
	WHITESBORO, TX 76273 Principal occupation / Job title (See Instructions) Employer (See Instructions))		
	RETIRED	·	RETIRED	-		

	MONET	ARY POLITICAL CONTRIBUTION	IS		SCHEDULE	■ A1	
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 10/35 Rpt: 13/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	Filers)
4	Date 09/23/2024	 Full name of contributor out-of-state PAC (ID#: DUVALL, CODY Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$20.00
8	Principal occu	DENISON, TX 75020 pation / Job title (See Instructions)	lg.	Employer (See Instructions			
Ŭ	DIVISION M		ľ	PSO ELECTRIC	,,		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_ EICHERT, BETTY Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$20.00
		CARTWRIGHT, TX 74731					
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	s)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#: ERICKSON, FRANCINE Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$10.00
	Daine die al access	GEORGETOWN, TX 78628	_	Faralana (O. a. la atauatica	<u></u>		
	RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	5)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_ESTES, GARY Contributor address; City; State; Zip Code SHERMAN, TX 75092)	•	Amount of Contribution (\$)	\$10.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#: EVANS, DONNA Contributor address; City; State; Zip Code DENISON, TX 75020)		Amount of Contribution (\$)	\$20.00
	Principal occu N/A	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
			•				

	MONET	ARY POLITICAL (S		SCHEDULE	E A1		
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 11/35 Rpt: 14/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)				3	Filer ID (Ethics Commission 00035364	Filers)
4	Date 08/19/2024	5 Full name of contributor FALLON, SUSAN6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$10.00
		FRISCO, TX 75033						
8	Principal occu SELF	pation / Job title (See Instructions	s) 	9	Employer (See Instructions SELF	s)		
	Date 09/23/2024	Full name of contributor FERGUSON, JOHN Contributor address; City; Si	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$20.00
	Principal occu	SHERMAN, TX 75092 pation / Job title (See Instructions	s)		Employer (See Instructions SELF	 - s)		
	Date 08/19/2024	Full name of contributor FLANDERS, JOHN Contributor address; City; Si	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$10.00
	Principal occu	SHERMAN, TX 75092 pation / Job title (See Instructions	s)		Employer (See Instructions	<u> </u> 5)		
	Date 09/23/2024	Full name of contributor FLANDERS, JOHN Contributor address; City; St	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$20.00
	Principal occu SUPPLIER [pation / Job title (See Instructions DEV. MGR.	5)		Employer (See Instructions RAYTHEON	5)		
	Date 08/19/2024	Full name of contributor FORSYTHE, GARY Contributor address; City; Si VAN ALSTYNE, TX 7549)		Amount of Contribution (\$)	\$10.00
	Principal occu RETIRED	pation / Job title (See Instructions	s)		Employer (See Instructions RETIRED	5)		

	MONET	ARY POLITICAL (CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 12/35 Rpt: 15/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	n Filers)
4	Date 08/19/2024	5 Full name of contributor GEIGER, DEBBIE6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$10.00
		SHERMAN, TX 75092					
8	Principal occu RETIRED	pation / Job title (See Instructions	9	Employer (See Instruction RETIRED	ıs)		
	Date 09/09/2024	Full name of contributor GLASSCOCK, DANA Contributor address; City; Si	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$150.00
	Principal occu	SHERMAN, TX 75090 pation / Job title (See Instructions	s)	Employer (See Instruction	ls)		
	N/A			N/A			
	Date 09/23/2024	Full name of contributor GONZALES, JOSE Contributor address; City; Si	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
		DALLAS, TX 75248					
	Principal occu SELF	pation / Job title (See Instructions	s)	Employer (See Instruction SELF	ıs)		
	Date 09/23/2024	Full name of contributor GOODWIN, JAMES Contributor address; City; Si	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$60.00
	Principal occu RETIRED	pation / Job title (See Instructions	5)	Employer (See Instruction RETIRED	ıs)		
	Date 09/09/2024	Full name of contributor GORDON, CINDY Contributor address; City; Si SHERMAN, TX 75090	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$60.83
	Principal occu N/A	pation / Job title (See Instructions	s)	Employer (See Instruction N/A	ıs)		

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 13/35 Rpt: 16/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	n Filers)
4	Date 09/23/2024	5 Full name of contributor [GRAVA, SAMANTHA6 Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$40.00
_	5: : .	SHERMAN, TX 75092	la.				
8	N/A	pation / Job title (See Instructions)	9	Employer (See Instructions N/A			
	Date 09/23/2024	Full name of contributor [GREEN, BRANDY Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$30.00
	Dringinal occu	HOWE, TX 75459 pation / Job title (See Instructions)		Employer (See Instructions	·/_		
	HOUSEWIF			HOUSEWIFE	•)		
	Date 09/13/2024	Full name of contributor [HAGENBUCH, BRENT Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$100.00
		LITTLE ELM, TX 75068					
	Principal occu CHAIRMAN	pation / Job title (See Instructions)		Employer (See Instructions TITUS	5)		
	Date 09/23/2024	Full name of contributor [HAMILTON, BILLY Contributor address; City; Sta SHERMAN, TX 75090	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$10.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	5)		
	Date 09/23/2024	Full name of contributor HARMAN, RAY Contributor address; City; Sta SHERMAN, TX 75092	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$20.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	s)		
			<u>, </u>				

	MONET	ARY POLITICAL CONTRI	BUTION	S		SCHEDULE	■ A1
	The Instru	ction Guide explains how to comple	te this for	n.	1	Total pages Schedule A1: Sch: 14/35 Rpt: 17/54	
2	FILER NAME Grayson Co	ınty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	ı Filers)
4	Date 08/19/2024	 Full name of contributor	PAC (ID#:)	7	Amount of Contribution (\$)	\$30.00
_		GUNTER, TX 75058					
8	Principal occu RETIRED	pation / Job title (See Instructions)	9	Employer (See Instructions RETIRED	5)		
	Date 08/19/2024	HATCHELL, ANGIE	PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Deignaignal annu	SHERMAN, TX 75090		Frankston (Cookstants)	<u></u>		
	DISPATCH	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/23/2024	Full name of contributor out-of-state HILL, SUSAN Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$20.00
		BONHAM, TX 75418					
	Principal occu SELF	pation / Job title (See Instructions)		Employer (See Instructions SELF	5)		
	Date 09/23/2024	HORNBECK, LAURA	PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	5)		
	Date 08/19/2024	Full name of contributor out-of-state HUNT, DALDEH Contributor address; City; State; Zip Code DENISON, TX 75021				Amount of Contribution (\$)	\$4.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			,				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 15/35 Rpt: 18/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)		3	Filer ID (Ethics Commission 00035364	n Filers)
4	Date 09/23/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$10.00
_		SHERMAN, TX 75090		Ĺ		
8	Principal occu MATERIAL I	pation / Job title (See Instructions) HANDLER	9 Employer (See Instructions	5)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_ JOHNSON, ANGELA Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$10.00
	Principal occu	VAN ALSTYNE, TX 75495 pation / Job title (See Instructions)	Employer (See Instructions	<u></u>		
	TEACHER		GRAYSON COUNTY C		OP	
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_ JONES, JOE Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$20.00
		TRENTON, TX 75490				
	Principal occu FORKLIFT C	pation / Job title (See Instructions) PERATOR	Employer (See Instructions	s)		
	Date 08/19/2024	Full name of contributor out-of-state PAC (ID#:_KALBFLEISCH, CARL Contributor address; City; State; Zip Code DENISON, TX 75020		•	Amount of Contribution (\$)	\$10.00
	Principal occu IT	pation / Job title (See Instructions)	Employer (See Instructions	<u>1 </u>		
	Date 09/05/2024	Full name of contributor out-of-state PAC (ID#:_KALBFLEISCH, MANDE Contributor address; City; State; Zip Code DENISON, TX 75020)		Amount of Contribution (\$)	\$260.25
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions XERNO ENTERPRISES			

	MONET	ARY POLITICAL CONTRIBU	JTION	IS .		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete	this for	n.	1	Total pages Schedule A1: Sch: 16/35 Rpt: 19/54	
2	FILER NAME Grayson Co	unty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	n Filers)
4	Date 09/23/2024	 Full name of contributor out-of-state PAGE)	7	Amount of Contribution (\$)	\$20.00
_	Dringing Loggy	SHERMAN, TX 75090	lo.	Employer (Coo Instructionary			
8	N/A	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 08/19/2024	Full name of contributor)		Amount of Contribution (\$)	\$10.00
	Deinsinal assu	SADLER, TX 76264		Franksian (Cook batwatian	_		
	RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	5)		
	Date 09/23/2024	Full name of contributor out-of-state PAGLAGRAY, ANNETTE Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$25.00
	Dringing aggr	WHITESBORO, TX 76273 pation / Job title (See Instructions)		Employer (Co.) Instructions	<u></u>		
	RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	·)		
	Date 08/19/2024	Full name of contributor out-of-state PAG LAWSON, BRENT Contributor address; City; State; Zip Code VAN ALSTYNE, TX 75495)	•	Amount of Contribution (\$)	\$230.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	5)		
	Date 08/21/2024	Full name of contributor out-of-state PAG LAWSON, BRENT Contributor address; City; State; Zip Code VAN ALSTYNE, TX 75495	C (ID#:)	•	Amount of Contribution (\$)	\$200.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A			
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 17/35 Rpt: 20/54		
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)	
	Grayson Co	unty Republican Party (CEC)			00035364		
4	Date 09/22/2024	5 Full name of contributor out-of-state PAC (ID#: LAWSON, BRENT	:)	7	Amount of Contribution (\$)	\$200.00	
		6 Contributor address; City; State; Zip Code					
		VAN ALSTYNE, TX 75495	1	L			
8	Principal occu RETIRED	pation / Job title (See Instructions)	9 Employer (See Instructions RETIRED	i) 			
	Date	Full name of contributor ut-of-state PAC (ID#:)		Amount of Contribution (\$)		
	09/21/2024	LAWSON, BRENT				\$10.00	
		Contributor address; City; State; Zip Code					
		VAN ALSTYNE, TX 75495					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	RETIRED		RETIRED				
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)		
	09/21/2024	LAWSON, BRENT				\$20.82	
		Contributor address; City; State; Zip Code					
		VAN ALSTYNE, TX 75495					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()			
	RETIRED		RETIRED				
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)		
	08/19/2024	LEAHY, CATHERINE			, ,	\$10.00	
		Contributor address; City; State; Zip Code					
		SHERMAN, TX 75092					
	Principal occu SELF	pation / Job title (See Instructions)	Employer (See Instructions SELF	5)			
	Date	Full name of contributor ut-of-state PAC (ID#:)		Amount of Contribution (\$)		
	09/23/2024	LITTLE, LARRY				\$100.00	
		Contributor address; City; State; Zip Code					
		FAIRVIEW, TX 75069					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			
	RETIRED		RETIRED	,			

	MONET	ARY POLITICAL CONTRIBU	JTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete t	this form.	1	Total pages Schedule A1: Sch: 18/35 Rpt: 21/54	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Grayson Co	ınty Republican Party (CEC)			00035364	
4	Date 09/23/2024	5 Full name of contributor out-of-state PAC LITTRELL, DALE	C (ID#:)	7	Amount of Contribution (\$)	\$10.00
		6 Contributor address; City; State; Zip Code SHERMAN, TX 75092				
8	Principal occu RETIRED	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAG	C (ID#:)	Т	Amount of Contribution (\$)	
	09/23/2024	LOCKE, JANET				\$52.05
		Contributor address; City; State; Zip Code				
		POTTSBORO, TX 75076				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	RETIRED		RETIRED			
	Date	Full name of contributor out-of-state PAG	C (ID#:)		Amount of Contribution (\$)	
	09/23/2024	MARR, REGGIE				\$40.00
		Contributor address; City; State; Zip Code HOWE, TX 75459				
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	s)		
	Date	Full name of contributor ut-of-state PAG	C (ID#:)		Amount of Contribution (\$)	
	09/23/2024	MARTIN, CHERYL Contributor address; City; State; Zip Code				\$63.00
		SHERMAN, TX 75090				
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	s)		
	Date	Full name of contributor out-of-state PAG	C (ID#:)		Amount of Contribution (\$)	
	09/23/2024	MATUELLA, CATHY				\$20.00
		Contributor address; City; State; Zip Code				
		SHERMAN, TX 75092				
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	s)		

	MONET	ARY POLITICAL (CONTRIBUTIO	Ν	S		SCHEDUL	E A1
	The Instru	ction Guide explains hov	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 19/35 Rpt: 22/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)				3	Filer ID (Ethics Commission 00035364	n Filers)
4	Date 08/19/2024	5 Full name of contributor MCCOY, ROBIN6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$10.00
0	Dringing oggu	HOWE, TX 75459	- T		Employer (See Instructions	<u></u>		
8	RETIRED	pation / Job title (See Instructions	5)	9	Employer (See Instructions RETIRED	5)		
	Date 09/23/2024	Full name of contributor MCDONALD, KARLA Contributor address; City; S)		Amount of Contribution (\$)	\$100.00
	Principal occu	HOWE, TX 75459 pation / Job title (See Instructions	3)		Employer (See Instructions	<u>;)</u>		
	MAYOR	patient too tale (eee metrocaen			Employer (Goo mondonom	,,		
	Date 08/19/2024	Full name of contributor MCGOWAN, JODY Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
		DENISON, TX 75020						
		pation / Job title (See Instructions DNAL THERAPIST	5)		Employer (See Instructions TEXOMA MEDICAL CE	•	ER	
	Date 09/23/2024	Full name of contributor MCGOWAN, JODY Contributor address; City; S DENISON, TX 75020)		Amount of Contribution (\$)	\$20.00
		I pation / Job title (See Instructions DNAL THERAPIST	5)		Employer (See Instructions TEXOMA MEDICAL CE		ER	
	Date 09/14/2024	Full name of contributor MCMATH, ALEXANDER Contributor address; City; S SHERMAN, TX 75092	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions NT	5)		Employer (See Instructions MCMATH SOLUTIONS		С	

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 20/35 Rpt: 23/54	
2	FILER NAME Grayson Co	unty Republican Party (CEC)		3	Filer ID (Ethics Commission 00035364	Filers)
4	Date 09/06/2024	 Full name of contributor out-of-state PAC (ID#: MILLER, BELINDA Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$30.00
8	Principal occu	SHERMAN, TX 75090 pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	N/A Date 09/21/2024	Full name of contributor out-of-state PAC (ID#:_MILLS, CODY Contributor address; City; State; Zip Code FORT WORTH, TX 76179	N/A		Amount of Contribution (\$)	\$20.82
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	()		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_MITCHELL, DANIEL Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	<u>;</u>)		
	Date Full name of contributor out-of-state PAC (II 09/23/2024 MONK, BOB Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$25.00
	Principal occu RETIRED	SHERMAN, TX 75090 pation / Job title (See Instructions)	Employer (See Instructions RETIRED	<u>;</u>)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_MONK, BOB Contributor address; City; State; Zip Code SHERMAN, TX 75090			Amount of Contribution (\$)	\$10.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	<u> </u>		

	MONET	ARY POLITICAL C		SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 21/35 Rpt: 24/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	ı Filers)
4	Date 09/23/2024	5 Full name of contributor MORILLA, BRIAN6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$10.00
		SHERMAN, TX 75092					
8	Principal occu DFPS	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/23/2024	Full name of contributor MOWDY, JASON Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu	SHERMAN, TX 75092 pation / Job title (See Instructions)	Employer (See Instructions	 ;)		
	CONSTRUC						
	Date 09/23/2024	Full name of contributor OLIN, JAMES Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.00
		DENISON, TX 75020					
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	5)		
	Date 09/23/2024	Full name of contributor PAIGE, WALTRAND Contributor address; City; St SHERMAN, TX 75092)		Amount of Contribution (\$)	\$30.00
	Principal occu SISD FOOD	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> 5)		
	Date 08/19/2024	Full name of contributor PATTERSON, DEBBIE Contributor address; City; St WHITESBORO, TX 76273	•			Amount of Contribution (\$)	\$20.00
	Principal occu RETIRED	pation / Job title (See Instructions		Employer (See Instructions RETIRED	s)		

	MONET	ARY POLITICAL CONTRIBUT	SCHEDULE A1			
	The Instru	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 22/35 Rpt: 25/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)		3	Filer ID (Ethics Commission 00035364	Filers)
4	Date 09/23/2024	 5 Full name of contributor out-of-state PAC (IE PERRY, BRENDA 6 Contributor address; City; State; Zip Code 	D#:)	7	Amount of Contribution (\$)	\$10.00
8		KNOLLWOOD, TX 75092 pation / Job title (See Instructions)	9 Employer (See Instructions	 s)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (IE PETTA, ANTHONY Contributor address; City; State; Zip Code DENISON, TX 75020			Amount of Contribution (\$)	\$30.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	5)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (IE PLUMLIE, BARBARA Contributor address; City; State; Zip Code SHERMAN, TX 75090	D#:)		Amount of Contribution (\$)	\$20.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date Full name of contributor out-of-state PA 08/19/2024 PORTER, JIMMY Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$10.00
	Principal occu RETIRED	SHERMAN, TX 75092 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 08/19/2024	Full name of contributor out-of-state PAC (IE PRATT, DIANNE Contributor address; City; State; Zip Code POTTSBORO, TX 75076	D#:)		Amount of Contribution (\$)	\$10.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	5)		

MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 23/35 Rpt: 26/54	
FILER NAME Grayson Cou	unty Republican Party (CEC)		3	Filer ID (Ethics Commission 00035364	Filers)
Date 09/23/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$40.00
	BELLS, TX 75414 pation / Job title (See Instructions)	9 Employer (See Instructions)		
Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_ PUCKETT, KATHY Contributor address; City; State; Zip Code HOWE, TX 75459	RETIRED		Amount of Contribution (\$)	\$15.00
Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)		
Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_QUICK, LOU ANNE Contributor address; City; State; Zip Code WHITESBORO, TX 76273)		Amount of Contribution (\$)	\$20.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_RAINE, DUANE Contributor address; City; State; Zip Code POTTSBORO, TX 75076			Amount of Contribution (\$)	\$10.00
Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)		
Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_ RENNE, GRETCHEN Contributor address; City; State; Zip Code SHERMAN, TX 75092)		Amount of Contribution (\$)	\$10.00
Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED)		
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	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this t	orm.	1	Total pages Schedule A1: Sch: 24/35 Rpt: 27/54	
2	FILER NAME Grayson Cou	ınty Republican Party (CEC)		3	Filer ID (Ethics Commission 00035364	n Filers)
4	Date 09/23/2024	 Full name of contributor out-of-state PAC (ID#:_RENSHAW, DAVE Contributor address; City; State; Zip Code 	_	7	Amount of Contribution (\$)	\$10.00
_		SHERMAN, TX 75090	1			
8	Principal occu RETIRED	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 07/26/2024	Full name of contributor out-of-state PAC (ID#:_RICHARDS, DIANA Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
	Drincinal occu	SHERMAN, TX 75092 pation / Job title (See Instructions)	Employer (See Instructions			
	HOMEMAKE		Employer (See Instructions	')		
	Date 08/30/2024	Full name of contributor out-of-state PAC (ID#:_RICHARDS, DIANA Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.27
	Principal occu	SHERMAN, TX 75092 pation / Job title (See Instructions)	Employer (See Instructions) 		
	HOMEMAKE		Employer (eee metruetierie	·)		
	Date 08/19/2024	Full name of contributor out-of-state PAC (ID#:_RICHARDS, DIANA Contributor address; City; State; Zip Code SHERMAN, TX 75092)		Amount of Contribution (\$)	\$5.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_RICHARDS, DIANA Contributor address; City; State; Zip Code SHERMAN, TX 75092			Amount of Contribution (\$)	\$250.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	5)		
			,			

	MONET	ARY POLITICAL CONTRIB	BUTION	IS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete	e this forr	n.	1	Total pages Schedule A1: Sch: 25/35 Rpt: 28/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	r Filers)
4	Date 09/23/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$10.00
_	Dringing! goog	SHERMAN, TX 75092	lo.	Employer (Con Instructional			
8	RETIRED	pation / Job title (See Instructions)	9	Employer (See Instructions RETIRED	5)		
	Date 09/23/2024	Full name of contributor	-)		Amount of Contribution (\$)	\$60.00
	Principal occu	SHERMAN, TX 75092 pation / Job title (See Instructions)		Employer (See Instructions	<u>;)</u>		
	RETIRED	pation / oob title (oce manustrons)		RETIRED	,,		
	Date 09/23/2024	Full name of contributor	PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		DENISON, TX 75020					
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	5)		
	Date 09/09/2024	Full name of contributor out-of-state PRIVERA, KATANNA Contributor address; City; State; Zip Code LAKEWOOD, WA 98496)		Amount of Contribution (\$)	\$35.00
		pation / Job title (See Instructions) NG MANAGER		Employer (See Instructions LAKEWOOD AUTO BO		,	
	Date 09/23/2024	Full name of contributor out-of-state P RUDZINSKI, RITA Contributor address; City; State; Zip Code WHITESBORO, TX 76273)		Amount of Contribution (\$)	\$10.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	5)		
			·				

	MONET	ARY POLITICAL CONTRIBUT	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 26/35 Rpt: 29/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)		3	Filer ID (Ethics Commission 00035364	ı Filers)
4	Date 09/23/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$40.00
8	•	DENISON, TX 75021 pation / Job title (See Instructions)	9 Employer (See Instructions	 - s)		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID RUSSELL, MARK (Mr.) Contributor address; City; State; Zip Code SHERMAN, TX 75090			Amount of Contribution (\$)	\$110.83
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	5)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID SCOTT, AMANDA Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
	Principal occu	BELLS, TX 75414 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID SHARP, SANDRA Contributor address; City; State; Zip Code HOWE, TX 75459			Amount of Contribution (\$)	\$30.00
	Principal occu STORE MAN	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> 5)		
	Date 07/05/2024	Full name of contributor out-of-state PAC (ID SHAW, MIKE (Mr.) Contributor address; City; State; Zip Code DENISON, TX 75020	#:)		Amount of Contribution (\$)	\$75.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions N/A	s)		

	MONET	ARY POLITICAL CONT	RIBUTION	S 		SCHEDULI	A1
	The Instru	ction Guide explains how to con	nplete this form	n.	1	Total pages Schedule A1: Sch: 27/35 Rpt: 30/54	
2	FILER NAME Grayson Cou	ınty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	Filers)
4	Date 08/02/2024	 Full name of contributor out-of SHAW, MIKE (Mr.) Contributor address; City; State; Zip C 	-state PAC (ID#:		7	Amount of Contribution (\$)	\$75.00
		DENISON, TX 75020					
8	Principal occu RETIRED	pation / Job title (See Instructions)	9	Employer (See Instructions N/A	s)		
	Date 09/06/2024	Full name of contributor out-of SHAW, MIKE (Mr.) Contributor address; City; State; Zip C	-state PAC (ID#:)		Amount of Contribution (\$)	\$75.00
	Principal occu	DENISON, TX 75020 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	RETIRED	(000 1110 (000 1110101010)		N/A	,		
	Date 09/23/2024	Full name of contributor out-of SHERMAN, RACHEL Contributor address; City; State; Zip C	-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
		BELLS, TX 75414					
	Principal occu INSURANCE	pation / Job title (See Instructions)		Employer (See Instructions SELF	s)		
	Date 09/23/2024	Full name of contributor out-of SHOEMAKER, LARRY (Mr.) Contributor address; City; State; Zip C)		Amount of Contribution (\$)	\$10.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	5)		
	Date 09/23/2024	Full name of contributor out-of SHULTZ, RHETTA Contributor address; City; State; Zip C	-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	. (5)		
			'				

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1	
	The Instru	ction Guide explains how to complete t	his fo	rm.	1	Total pages Schedule A1: Sch: 28/35 Rpt: 31/54	
2	FILER NAME Grayson Cou	ınty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	n Filers)
4	Date 09/23/2024	 Full name of contributor out-of-state PAC SIMS, JACENTA Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$10.00
•	Dringing oggu	MCKINNEY, TX 75071	10	Employer (See Instructions	,, 		
0	SUBSTITUT	pation / Job title (See Instructions) E TEACHER		Employer (See Instructions	·)		
	Date 09/23/2024	Full name of contributor out-of-state PAC SIPE, SHERRY Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$40.00
		SHERMAN, TX 75090					
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	5)		
	Date 09/23/2024	Full name of contributor out-of-state PAC SMITH, TAP Contributor address; City; State; Zip Code	(ID#:			Amount of Contribution (\$)	\$65.00
		SHERMAN, TX 75090					
	Principal occu OWNER	pation / Job title (See Instructions)		Employer (See Instructions OWNER	5)		
	Date 09/23/2024	Full name of contributor out-of-state PAC SNYDER, DANIEL Contributor address; City; State; Zip Code POTTSBORO, TX 75076				Amount of Contribution (\$)	\$20.00
	Principal occu PROJECT M	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> 5)		
	Date 09/23/2024	Full name of contributor out-of-state PAC SOUTHERLAND, LB Contributor address; City; State; Zip Code GORDONVILLE, TX 76245				Amount of Contribution (\$)	\$40.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	s)		
			l				

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 29/35 Rpt: 32/54	
2	FILER NAME Grayson Co	unty Republican Party (CEC)		3	Filer ID (Ethics Commission 00035364	Filers)
4	Date 09/23/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	SHERMAN, TX 75092 pation / Job title (See Instructions)	9 Employer (See Instructions)		
	RETIRED		RETIRED			
	Date 08/19/2024	Full name of contributor out-of-state PAC (ID#: STANTON, BILL Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		DENISON, TX 75021				
		pation / Job title (See Instructions) DN SPECIALIST	Employer (See Instructions)		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#: STAPLES, RICK Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$75.00
		TIOGA, TX 76271	1			
		pation / Job title (See Instructions) OF TECHNOLOGY	Employer (See Instructions RGT WEALTH ADVISO		; 	
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#: STEVENSON, LARRY Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Deinainal again	SHERMAN, TX 75092	Frankrija (Coo kooku jaki ja ja			
	RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#: STREET, ROY Contributor address; City; State; Zip Code SHERMAN, TX 75092			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	RETIRED		RETIRED			

	MONET	ARY POLITICAL CONTRIBUTIO	N	IS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this fo	ori	n.	1	Total pages Schedule A1: Sch: 30/35 Rpt: 33/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	Filers)
4	Date 09/23/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$20.00
8	Principal occu	SHERMAN, TX 75092 pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	;) 		
0	RETIRED	pation / 300 title (See Instructions)	3	RETIRED	"		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_ TAYLOR, LINDA Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
		SHERMAN, TX 75090					
	Principal occu TEACHER	pation / Job title (See Instructions)		Employer (See Instructions GCS	5)		
	Date 08/19/2024	Full name of contributor out-of-state PAC (ID#:_ TEUBER, KAAREN Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
		VAN ALSTYNE, TX 75495					
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	5)		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_ TEUBER, KAAREN J. Contributor address; City; State; Zip Code VAN ASLTYNE, TX 75495-0696)		Amount of Contribution (\$)	\$42.50
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_ TOWERS, BEVERLY (Mrs.) Contributor address; City; State; Zip Code SHERMAN, TX 75092				Amount of Contribution (\$)	\$70.00
	Principal occu N/A	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL C	CONTRIBUTION	IS		SCHEDULE	■ A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 31/35 Rpt: 34/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	Filers)
4	Date 07/26/2024	Full name of contributor TOWERS, BOB (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code		7	Amount of Contribution (\$)	\$20.00
8	Principal occu	SHERMAN, TX 75092 pation / Job title (See Instructions)	9	Employer (See Instructions	(s)		
	CLIENT SEF			COMSPEC, INC.	,		
	Date 08/09/2024	Full name of contributor TOWERS, BOB (Mr.) Contributor address; City; Sta)		Amount of Contribution (\$)	\$25.00
		SHERMAN, TX 75092					
	Principal occu CLIENT SEF	pation / Job title (See Instructions)		Employer (See Instructions COMSPEC, INC.	5)		
	Date 08/30/2024	Full name of contributor TOWERS, BOB (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Datasias Issue	SHERMAN, TX 75092		Fundament (Constructions	$\overline{\Gamma}$		
	CLIENT SEF	pation / Job title (See Instructions) RVICE REP.		Employer (See Instructions COMSPEC, INC.	•)		
	Date 09/09/2024	Full name of contributor TRANTHAM, NEAL Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code			Amount of Contribution (\$)	\$70.00
	Principal occu RETIRED	DENISON, TX 75020 pation / Job title (See Instructions)		Employer (See Instructions N/A	<u> </u> ;)		
	Date 08/19/2024	Full name of contributor TRUNGLIO, NITA Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	RETIRED			RETIRED			

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 32/35 Rpt: 35/54	
2	FILER NAME Grayson Cou	unty Republican Party (CEC)		3	Filer ID (Ethics Commission 00035364	n Filers)
4	Date 09/23/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$10.00
_		WHITESBORO, TX 76273				
8	Principal occu RETIRED	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_WAMHOFF, PATRICK Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Dringinal occu	FRISCO, TX 75036 pation / Job title (See Instructions)	Employer (See Instructions	_		
	•	DNAL ACCOUNT EXEC	Employer (See Instructions ASURION	')		
	Date 08/19/2024	Full name of contributor out-of-state PAC (ID#:_ WARD, MELANIE Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Dein sin al a a su	POTTSBORO, TX 75076	Faralas as (Caralas trasticas	_		
	DENTAL HY	pation / Job title (See Instructions) GIENIST	Employer (See Instructions	5)		
	Date 08/19/2024	Full name of contributor out-of-state PAC (ID#:_ WEIR, NANCY Contributor address; City; State; Zip Code COLLINSVILLE, TX 76233)		Amount of Contribution (\$)	\$10.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	5)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_WEIR, NANCY Contributor address; City; State; Zip Code COLLINSVILLE, TX 76233			Amount of Contribution (\$)	\$20.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	i)		

	MONET	ARY POLITICAL CONTRIBUTI		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 33/35 Rpt: 36/54	
2	FILER NAME Grayson Co	AME n County Republican Party (CEC)		3	Filer ID (Ethics Commission 00035364	n Filers)
4	Date 09/23/2024	 Full name of contributor	t:)	7	Amount of Contribution (\$)	\$18.00
8	Principal occu	DENISON, TX 75020 pation / Job title (See Instructions)	9 Employer (See Instructions	 		
	RETIRED		RETIRED			
	Date 08/19/2024	Full name of contributor out-of-state PAC (ID# WHITFIELD, MONICA Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Dain sin al acces	HOWE, TX 75459	Fundamentaria	<u> </u>		
	RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	5)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID# WHITLOCK, DIANNA Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$30.00
		BELLS, TX 75414		Ĺ		
	REALTOR	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/19/2024	Full name of contributor out-of-state PAC (ID# WILLIAMS Jr., JOE C Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions) //CE	Employer (See Instructions SELF	<u> </u> s)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID# WILLIAMS Jr., JOE C Contributor address; City; State; Zip Code	<u> </u>		Amount of Contribution (\$)	\$100.00
		SHERMAN, TX 75092				
	Principal occu FOOD SER	pation / Job title (See Instructions) /ICE	Employer (See Instructions SELF	<u>.</u> S)		
			1			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1				
	The Instruc	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 34/35 Rpt: 37/54			
2	FILER NAME Grayson Cou	unty Republican Party (CEC)			3	Filer ID (Ethics Commission 00035364	Filers)
4	Date 09/23/2024	5 Full name of contributor out-of-state PAC (ID#:_ WILLIAMS Jr., JOE C 6 Contributor address; City; State; Zip Code			7	Amount of Contribution (\$)	\$100.00
•	Dringing con	SHERMAN, TX 75092	_	Employer (See Instructions	<u> </u>		
0	FOOD SER\	pation / Job title (See Instructions) /ICE	9	Employer (See Instructions SELF	·)		
	Date 08/19/2024				Amount of Contribution (\$)	\$15.00	
	Dringinal occu	VAN ALSTYNE, TX 75095 Principal occupation / Job title (See Instructions) Employer (See Instructions)					
	Principal occupation / Job title (See Instructions) RACE TIMING CHIP-2-				·)		
	Date 08/19/2024	Full name of contributor out-of-state PAC (ID#:) WOODROOF, BARBARA Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$20.00
		GUNTER, TX 75058					
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions RETIRED	5)		
	Date 09/09/2024					Amount of Contribution (\$)	\$26.17
	Principal occupation / Job title (See Instructions) RETIRED GUNTER, TX 75058 Employer (See Instru				<u> </u> 5)		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:) WOODROOF, GEORGE Contributor address; City; State; Zip Code GUNTER, TX 75058			Amount of Contribution (\$)	\$26.17	
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	1 Total pages Schedule A1: Sch: 35/35 Rpt: 38/54	
2	FILER NAME Grayson Co	unty Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4	Date 08/19/2024	5 Full name of contributor		7 Amount of Contribution (\$) \$10.00
		DENISON, TX 75021		
8	Principal occu RETIRED	ipation / Job title (See Instructions)	9 Employer (See Instructions RETIRED	s)
	Date Full name of contributor out-of-state PAC (ID#:) 09/09/2024 WYLIE, ANNA Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$56.67
		DENISON, TX 75021		
	Principal occu RETIRED	upation / Job title (See Instructions)	Employer (See Instructions RETIRED	5)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	- (I Committee L	Food/Beverage Expense Sift/Awards/Memorials Expense Legal Services The Instruction Guide expla		xpense Vages/	Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 1/16 Rpt: 39/54	Grayson Cou	unty Republican Party	(CEC)				00035364	
4	Date	5 Payee name							
	07/12/2024	AWARDS UI	NLIMITED						
6	Amount (\$)	7 Payee address	s; City; S	tate; Zip Co	de				
	\$9.00	1000 N. TRA	VIS						
		STE. D							
		SHERMAN,	TX 75090						
8	PURPOSE	(a) Category (See	e Categories listed at the top of thi	s schedule)	(b)	Description			
	OF EXPENDITURE		Memorials Expense	,		=		de of Texas. Com	
	EXI ENDITORE					Check if Austin, AWARD EXP		officeholder living	expense
						AVVAND EAP	LIV	IJL	
9	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	l aht			Office he	eld
	expenditure to benefit C/O			200	.g. 14			300 AC	-
	Date	Payee name							
	08/05/2024	BAYLESS H	ALL INS. CO.						
	Amount (\$)	Payee address	•	tate; Zip Co	de				
	\$955.00	COLUMBIA	INSURANCE						
		2007 TEXON	MA PARKWAY SUITE	200					
		SHERMAN,	TX 75091						
	PURPOSE OF		e Categories listed at the top of thi	s schedule)	(b)	Description			
	EXPENDITURE	Office Overh	ead/Rental Expense			=		de of Texas. Com officeholder living	
						HQ EXPENS			•
	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ght			Office he	eld
L	expenditure to benefit C/OI	1							
	Date	Payee name							
L	08/05/2024	CITY OF SH	ERMAN PERMITS & I	NSPECTIO	NS				
	Amount (\$)	Payee address	s; City; S	tate; Zip Co	de				
	\$75.00	220 W MULE	BERRY ST.						
		SHERMAN,	TX 75090						
	PURPOSE OF		e Categories listed at the top of thi	s schedule)	(b)	Description			
	EXPENDITURE	Office Overh	ead/Rental Expense					de of Texas. Com officeholder living	•
						HQ EXPENS			, experies
						, -	_		
	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ght			Office he	eld
	expenditure to benefit C/OI	1							

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ee Legal S	ards/Memorials Exp ervices nstruction Guide	Salar		ges/Contract Labor		Travel Out of Di OTHER (enter a	strict a category not listed above)	1
1	Total pages Schedule F1:	2 FII	ER NAMF					3	Filer ID	(Ethics Commission	Filers)
	Sch: 2/16 Rpt: 40/54			Republican P	arty (CEC)			<u> </u>	00035364		- · - /
4	Date	5 Pay	ee name								
	09/13/2024	CIT	Y OF SHERM	1AN							
6	Amount (\$)	7 Pay	ree address;	City;	State; Zip	Code	e				
	\$17.23	РО	BOX 1106								
		SH	ERMAN, TX 7	'5091							
8	PURPOSE			gories listed at the to		1/1	b) Description				
ľ	OF			gories listed at the to 'Rental Expen		١,		outsi	ide of Texas. Con	plete Schedule T.	
	EXPENDITURE	Oil	overnedu.	пспа Ехреп	130				, officeholder living		
							HQ EXPENS	ES	;		
9	Complete ONLY if direct		lidate/Officehol	der name	Office	sough	nt		Office h	eld	
	expenditure to benefit C/OI	l									
	Date	Pay	ree name								
	09/24/2024	CO	NVERTKIT								
	Amount (\$)	Pay	ree address;	City;	State; Zip	Code	e				
	\$30.86	N/A	١								
			ERMAN, TX			<u>, </u>					
	PURPOSE OF			gories listed at the to		(I	Description		:	unlete Oakeadul . T	
	EXPENDITURE	Off	ice Overhead	Rental Expen	ise		=		ide of Texas. Con , officeholder livin	nplete Schedule T.	
							HQ EXPENS			a exherine	
H	Complete ONLY if direct	Cano	lidate/Officehol	der name	Office	<u> </u>	 nt		Office h	eld	
	expenditure to benefit C/OI					3.					
	Date	Pav	ree name								
	07/02/2024	,	AYSON UNIT	ED							
	Amount (\$)		ree address;	City;	State; Zip	Code	<u> </u>				
	\$50.00	•	ee address, LW CRAWFC	-	σιαι θ, ΔΙΡ	Coul	-				
	Φ00.00	531	L VV CRAVVEC	וכ טחיי							
		5.	NICON TY 7	-000							
			NISON, TX 7			1.					
	PURPOSE OF			gories listed at the to	p of this schedule)	(I	Description	ou to	ide of Toyles Com	anlete Cohodule T	
	EXPENDITURE	Eve	ent Expense				=		de of Texas. Con , officeholder livin	nplete Schedule T. Di expense	
							EVENT EXP			5 ipoco	
							· · ·				
	Complete ONLY if direct	Cano	lidate/Officehol	der name	Office	<u>l</u> sough	nt		Office h	eld	
	expenditure to benefit C/OI					3.					

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	d Cor		Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide			Expense Wages	e /Contract Labor		Travel in District Travel Out of Dist OTHER (enter a c	rict category not listed above)
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers)
L	Sch: 3/16 Rpt: 41/54	L	Grayson Co	ounty Republican P	Party (CE	C)			L	00035364	
4	Date	5	Payee name								
L	07/05/2024		GUMROAD	, INC.							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode				
	\$5.55		548 MARKE	ET STREET #4130)9						
L			SAN FRAN	CISCO, CA 94104							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the to	op of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Fees					므		de of Texas. Comp	
								E-COMMER(officeholder living	expense
										. ===	
9	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	<u>l</u> ught			Office he	ld
	expenditure to benefit C/O						5				
	Date		Payee name								
	07/26/2024		GUMROAD	, INC.							
	Amount (\$)	H	Payee addres	ss; City;	State;	Zip Co	ode				
	\$5.76		548 MARKE	ET STREET #4130)9	-					
			SAN FRAN	CISCO, CA 94104							
	PURPOSE	(a)	Category (Se	ee Categories listed at the to	op of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Fees	-		•				de of Texas. Comp	
								Check if Austin,		officeholder living	expense
								L-COMMERC	- ⊏	ı LLJ	
_	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name		Office sou	<u>l</u> ught			Office he	ld
	expenditure to benefit C/O		Zaraidato/OIII	osoidoi namo			-9·11			Cilido fiel	
H	Date		Payee name								
	08/02/2024		GUMROAD	. INC.							
	Amount (\$)	_	Payee addres		State.	Zip Co	nde				
	\$5.55		,	ET STREET #4130		Zip Cl	oue				
	ψ3.33		C TO IVII (I (I (I	SINCE! #4100							
			SAN FRAN	CISCO, CA 94104							
	PURPOSE	(a)	Category (Se	ee Categories listed at the to	op of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Fees					ш		de of Texas. Comp	
								E-COMMER(officeholder living	expense
										0	
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	<u>l</u> ught			Office he	ld
	expenditure to benefit C/O						•				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/16 Rpt: 42/54	Grayson County Republican Party (CEC) 00035364
4	Date	5 Payee name
	08/09/2024	GUMROAD, INC.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3.53	548 MARKET STREET #41309
		SAN FRANCISCO, CA 94104
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		E-COMMERCE FEES
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
,	expenditure to benefit C/O	
	D :	
	Date	Payee name
	08/30/2024	GUMROAD, INC.
	Amount (\$)	Payee address; City; State; Zip Code
	\$18.00	548 MARKET STREET #41309
		SAN FRANCISCO, CA 94104
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		E-COMMERCE FEES
	Operation ONLY if all part	Open Highest (Office health and a second to the second to
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	•	
	Date	Payee name
	09/06/2024	GUMROAD, INC.
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.72	548 MARKET STREET #41309
		SAN FRANCISCO, CA 94104
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense E-COMMERCE FEES
		E-COIVIIVIENCE FEES
	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/16 Rpt: 43/54	Grayson County Republican Party (CEC) 00035364
4 Date	5 Payee name
07/05/2024	IRON CREEK STORAGE
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$163.00	8724 FM1417
	SHERMAN, TX 75090
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense STORAGE RENTAL
	STORAGE RENTAL
O Committee Chillian in	Our didn't 10 ff a baldon name
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ever	
Date	Payee name
08/02/2024	LAWSON, BRENT
Amount (\$)	Payee address; City; State; Zip Code
\$2,980.25	PO BOX 1903
	VAN ALSTYNE, TX 75495
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	HQ EXPENSES
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
<u> </u>	
Date	Payee name
08/09/2024	LAWSON, BRENT
Amount (\$)	Payee address; City; State; Zip Code
\$308.20	PO BOX 1903
	VAN ALSTYNE, TX 75495
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense
Z. ZADITORE	Clock if Austin, TX, officeholder living expense
	SIGN PRINTING
Operation Children	Ora didata (Office hadden grown
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
p = 1 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	tical Committee Legal Services Salaries/Wages/Contract Labor OTHER	ut of District (enter a category not listed above)
	oroun oura'r aymone	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	L: 2 FILER NAME 3 Filer ID	(Ethics Commission Filers)
	Sch: 6/16 Rpt: 44/54	Grayson County Republican Party (CEC) 00035	364
4	Date	5 Payee name	
	08/19/2024	LAWSON, BRENT	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$40.00	D PO BOX 1903	
		VAN ALSTYNE, TX 75495	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Check if Austin, TX, officehold	er living expense
		TIQ EXI ENSES	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Of	fice held
9	expenditure to benefit C/OI		nce neiu
	Date	Payee name	
	08/02/2024	LAWSON, SANDRA	
	Amount (\$)		
	\$200.00		
	φ200.00	5 FO BOX 1903	
		VANIAL CTVNIE TV 75405	
		VAN ALSTYNE, TX 75495	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if translatitish of Taxon	on Complete Cohodule T
	EXPENDITURE	Event Expense Check if travel outside of Texa	
		EVENT EXPENSE	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Of	fice held
	expenditure to benefit C/OI	ОН	
_	Date	Payee name	
	09/04/2024	LOS HERMANOS PARTNERSHIP	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,180.25		
	, ,		
		SHERMAN, TX 75090	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas	as. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officehold	ler living expense
		HQ EXPENSES	
L			
	Complete ONLY if direct	S	fice held
L	expenditure to benefit C/OI	'UH	

SCHEDULE F1

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

Fees Office Overhead/
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wages/t

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/16 Rpt: 45/54	Grayson County Republican Party (CEC) 00035364
4	Date	5 Payee name
	08/20/2024	LOWE'S
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$59.67	2801 N HWY 75
		SHERMAN, TX 75090
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		HQ EXPENSES
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
F	Date	Payee name
	09/17/2024	PRINT PLACE
	Amount (\$)	Payee address; City; State; Zip Code
	\$390.78	1110 AVENUE H EAST
		ARLINGTON, TX 76011
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		SIGN PRINTING
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	+
Г	Date	Payee name
	08/26/2024	SAM'S CLUB
	Amount (\$)	Payee address; City; State; Zip Code
	\$414.49	3333 N HWY 75
		SHERMAN, TX 75090
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense HQ GRAND OPENING FOOD
		TQ GRAND OF ENING FOOD
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labo		Travel Out of Dis OTHER (enter a	trict category not listed above)
ᆫ	· 	The Instruction Guide explains how to complete this form	1.		
1	Total pages Schedule F1:	2 FILER NAME	3	Filer ID	(Ethics Commission Filers)
	Sch: 8/16 Rpt: 46/54	Grayson County Republican Party (CEC)		00035364	
4	Date	5 Payee name			
	08/13/2024	SHERMAN UTILITY			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$170.00	405 N RUSK			
		SHERMAN, TX 75090			
8	DUDDOCE				
l°	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overthe and (Pointed Tymography)		side of Texas. Com	nlete Schedule T
	EXPENDITURE	I omee overnead/Kental Expense		I, officeholder living	
		HQ EXPI			•
9	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/OI				
H	Date	Payee name			
	09/11/2024	SUMMER ENERGY			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$91.54	PO BOX 460485			
	φ91.54	PO BOX 400403			
		HOUSTON, TX 77056			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	onice overnead/Nental Expense		side of Texas. Com (, officeholder living	
		HQ EXPI			ехрепзе
			,,	•	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	ald.
	expenditure to benefit C/OI			000 1	
⊨	Date	Davies name			
	07/20/2024	Payee name SUPER CHEAP SIGNS			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$294.12	9200 WATERFORD CENTRE BLVD			
		AUSTIN, TX 78758			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descriptio	n		
	OF EXPENDITURE	I finding Expense		side of Texas. Com	
		, <u> </u>		, officeholder living	expense
		SIGN PR	CHA I HM	J	
ldash	Operation ON V. V. V.	On didate (Office helder come		6‴ :	.1.1
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought		Office he	eiu
L					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 9/16 Rpt: 47/54	2 FILER NAME Grayson County Republican Party (CEC) 3 Filer ID (Ethics Commission Filers) 00035364
4	Date	5 Payee name
	07/22/2024	SUPER CHEAP SIGNS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$34.61	9200 WATERFORD CENTRE BLVD
		AUSTIN, TX 78758
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		SIGN PRINTING
L		
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/19/2024	SUPER CHEAP SIGNS
	Amount (\$)	Payee address; City; State; Zip Code
	\$292.60	9200 WATERFORD CENTRE BLVD
		AUSTIN, TX 78758
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		SIGN PRINTING
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	y
	Date	Payee name
	09/03/2024	SUPER CHEAP SIGNS
	Amount (\$) \$329.89	Payee address; City; State; Zip Code 9200 WATERFORD CENTRE BLVD
		AUSTIN, TX 78758
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		SIGN PRINTING
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	y

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/16 Rpt: 48/54	Grayson County Republican Party (CEC) 00035364
4	Date	5 Payee name
	09/10/2024	SUPER CHEAP SIGNS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$313.65	9200 WATERFORD CENTRE BLVD
		AUSTIN, TX 78758
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		SIGN PRINTING
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/25/2024	TEXAS GOP STORE
	Amount (\$)	Payee address; City; State; Zip Code
	\$370.76	404 IH-45
		HUNTSVILLE, TX 77488
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense SIGN PRINTING
		SIGNITATING
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Douge name
	08/12/2024	Payee name TEXOMA FIRE EQUIPMENT INC
	Amount (\$)	Payee address; City; State; Zip Code
	\$32.48	4909 TX-91
		DENICON TV 75004
		DENISON, TX 75021
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		HQ EXPENSES
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

	Credit Card Payment The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 11/16 Rpt: 49/54	Grayson County Republican Party (CEC) 00035364					
4	Date	5 Payee name					
	08/12/2024	THE HOME DEPOT					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$8.02	601 NORTHCREEK DR					
		SHERMAN, TX 75092					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense HQ EXPENSES					
		THĘ ZAI ZNOZO					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
3	expenditure to benefit C/OF						
	D-4-						
	Date	Payee name					
	09/25/2024	TOWERS DESIGN GROUP					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$415.68	605 W BELDEN ST					
		SHERMAN, TX 75092					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Printing Expense					
EXI ENDITORE		Check if Austin, TX, officeholder living expense					
		SIGN PRINTING					
	Operation ONLY if allowed	Our distance (Office health as marries and Office health					
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held					
	<u> </u>						
	Date	Payee name					
	09/25/2024	TOWERS, BOB (Mr.)					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$100.00	1713 W. WASHINGTON STREET					
SHERMAN, TX 75092							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE		Event Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense EVENT EXPENSE					
		EVENTEAPENSE					
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 12/16 Rpt: 50/54	Grayson County Republican Party (CEC) 00035364					
4	Date	5 Payee name					
	08/19/2024	TX CUSTOM CREATIONS					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$340.99	N/A					
		DENISON, TX 75020					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense TSHIRT EXPENSE					
		TOTAL ENGL					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
9	Complete ONLY if direct expenditure to benefit C/Ol						
	Date	Payee name					
	09/17/2024	TX CUSTOM CREATIONS					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$384.29	N/A					
		DENISON, TX 75020					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.					
	Check if Austin, TX, officeholder living expense						
TSHIRT EXPENSE							
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						
	Date	Payee name					
08/26/2024 US POST OFFICE							
	Amount (\$)	Payee address; City; State; Zip Code					
	\$241.00	701 PEYTON					
		SHERMAN, TX 75090					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Office Overhead/Rental Expense					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		PO BOX RENTAL					
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held					
	experiulture to beliefft C/O	•					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

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

	Credit Card Payment The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 13/16 Rpt: 51/54	Grayson County Republican Party (CEC) 00035364					
4	Date	5 Payee name					
l	09/11/2024	VAN ALSTYNE PARKS AND RECREATION					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$125.00	PO BOX 247					
l							
L		VAN ALSTYNE, TX 75495					
8	(See Categories listed at the top of this schedule)						
l	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
l		EVENT EXPENSE					
l							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
l	expenditure to benefit C/OI	1					
F	Date	Payee name					
l	07/11/2024	WELCH, WILLIAM					
H	Amount (\$)	Payee address; City; State; Zip Code					
l	\$166.40 PO BOX 949 WHITESBORO, TX 76273						
l							
l							
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
l	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.					
Check if Austin, TX, officeholder living expense							
l	EVENT EXPENSE						
⊢	Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
l	expenditure to benefit C/OI						
F	Date	Payee name					
l	09/23/2024	WINRED					
H	Amount (\$)	Payee address; City; State; Zip Code					
	\$3.04	1776 WILSON BLVS STE 350					
l							
l	ARLINGTON, VA 22209						
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
l	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.					
Check if Austin, TX, officeholder living expense							
		E-COIVIMENCE FEE3					
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OH						
-							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
pense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
	Sch: 14/16 Rpt: 52/54	Grayson County Republican Party (CEC) 00035364			
4	Date	5 Payee name			
	09/22/2024	WINRED			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$7.88	1776 WILSON BLVS STE 350			
L		ARLINGTON, VA 22209			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense E-COMMERCE FEES			
		E-COMMERCE FEES			
L					
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	experientare to benefit 6/61	<u>'</u>			
	Date	Payee name			
	09/21/2024	WINRED			
	Amount (\$)	Payee address; City; State; Zip Code			
\$2.03 1776 WILSON BLVS STE 350					
ARLINGTON, VA 22209					
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
	E-COMMERCE FEES				
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OH				
	Date	Payee name			
	09/14/2024	WINRED			
Г	Amount (\$)	Payee address; City; State; Zip Code			
\$0.99 1776 WILSON BLVS STE 350					
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		E-COMMERCE FEES			
L					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
L	expenditure to benefit C/OI	1			
ı					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 15/16 Rpt: 53/54						
4	Date	5 Payee name					
	09/13/2024	WINRED					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$3.94	1776 WILSON BLVS STE 350					
		ARLINGTON, VA 22209					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.					
Check if Austin, TX, officeholder living expense							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI						
_	Date	Payee name					
	09/09/2024	WINRED					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$2.37	1776 WILSON BLVS STE 350					
	¥						
		ARLINGTON, VA 22209					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense E-COMMERCE FEES					
		E CONNICIOE I LES					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OH							
-	Date	Payee name					
	09/05/2024	WINRED					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$10.25	1776 WILSON BLVS STE 350					
	7-0:-0						
		ARLINGTON, VA 22209					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.					
	ZAI ZABITORZ	Check if Austin, TX, officeholder living expense					
		E-COMMERCE FEES					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	y					
l							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Gift/Awa	verage Expense rds/Memorials Expense rvices	Polling Expense Printing Expens	d/Rental Expense e se s/Contract Labor	Travel in Distric		
	Credit Card Payment	The Ins	struction Guide explains	how to comple	ete this form.			
1	Total pages Schedule F1:	FILER NAME				3 Filer ID	(Ethics Commission Filers)	
	Sch: 16/16 Rpt: 54/54	Grayson County F	Republican Party (CE	EC)		00035364		
4	Date	Payee name						
	09/05/2024	WINRED						
٦	Amount (\$) 7 Payee address; City; State; Zip Code							
ľ				s, Zip Code				
	Φ1/4.07	\$174.07 1776 WILSON BLVS STE 350						
		ARLINGTON, VA	22209					
8	PURPOSE	Category (See Catego	ories listed at the top of this sc	hedule) (b)	Description			
	OF EXPENDITURE	Fees			_	outside of Texas. Co		
	EXI ENDITORE				_	, TX, officeholder livir	ng expense	
					E-COMMERO	JE FEES		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholde	er name	Office sought		Office h	neld	
L	experientare to benefit G/GI							