

# CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

<b>1</b> Filer ID (Ethics Commission Filers) 00015765	<b>2</b> Total pages filed: 20	<b>OFFICE USE ONLY</b>	
<b>3</b> COMMITTEE NAME Montgomery County Republican Party of Texas (CEC)	Date Received <b>ELECTRONICALLY FILED</b> 10/29/2024		
<b>4</b> TREASURER NAME Shirley, Charles (Mr.)	Date Hand-delivered or Date Postmarked		
<b>5</b> ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	Receipt #
	<input type="checkbox"/> July 15	<input type="checkbox"/> 10th day after campaign treasurer resignation	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution report	Amount
	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Other (specify) _____	Date Processed
<b>6</b> ORIGINAL PERIOD COVERED	Month Day Year 09/27/2024	THROUGH	Month Day Year 10/26/2024
<b>7</b> EXPLANATION OF CORRECTION			

**7 EXPLANATION OF CORRECTION**  
Updated report with contributions not included in original.

**8 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

**Semiannual reports:** I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

**Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mr. Charles Shirley  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

**Remember To Attach Any Part Of The Campaign Finance Report Form  
Needed To Report And Explain Corrections**

# COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

FORM CEC  
COVER SHEET PG 1

<b>The CEC Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b> (Ethics Commission Filers) 00015765	<b>2 Total pages filed:</b> 20
<b>3 COMMITTEE NAME</b> Montgomery County Republican Party of Texas (CEC)		<b>OFFICE USE ONLY</b>	
		Date Received <b>ELECTRONICALLY FILED</b> 10/29/2024	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
<b>4 COMMITTEE ADDRESS</b>  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 18001 Highway 105 West Suite 102 Montgomery, TX 77356-2881		
	<b>5 CAMPAIGN TREASURER NAME</b>  MS / MRS / MR FIRST MI Mr. Charles <hr/> NICKNAME LAST SUFFIX Shirley		
<b>6 CAMPAIGN TREASURER STREET ADDRESS</b>  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3226 West Benders Landing Blvd. Spring, TX 77386-1890		
<b>7 CAMPAIGN TREASURER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3226 West Benders Landing Blvd. Spring, TX 77386-1890		
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE PHONE NUMBER EXTENSION (713) 854-7546		
<b>9 REPORT TYPE</b>	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final Report <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
<b>10 PERIOD COVERED</b>	Month Day Year      THROUGH      Month Day Year 09/27/2024           10/26/2024		
<b>11 ELECTION</b>	ELECTION DATE Month Day Year 11/05/2024	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

**GO TO PAGE 2**

# COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Montgomery County Republican Party of Texas (CEC)	<b>13 Filer ID</b> (Ethics Commission Filers) 00015765
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Republican
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,666.03
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 48,484.23
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 76,125.45
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**16 AFFIDAVIT**

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

Mr. Charles Shirley  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

**SUBTOTALS - CEC****FORM CEC**  
**COVER SHEET PG 3**  
4 of 20

<b>17 COMMITTEE NAME</b> Montgomery County Republican Party of Texas (CEC)		<b>18 Filer ID</b> (Ethics Commission Filers) 00015765
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,666.03
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 48,484.23
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.83

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/8 Rpt: 5/20
<b>2</b> FILER NAME Montgomery County Republican Party of Texas (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00015765
<b>4</b> Date 09/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Betty (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Shenandoah, TX 77381	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beard, Jeff (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  The Woodlands, TX 77382	
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bledsoe, Greg (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Conroe, TX 77302	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brasher, William "Web" (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Conroe, TX 77302	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cady, Phill (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Conroe, TX 77302	
Principal occupation / Job title (See Instructions) Aircraft Mechanic		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/8 Rpt: 6/20
<b>2</b> FILER NAME Montgomery County Republican Party of Texas (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00015765
<b>4</b> Date 10/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cliburn, Frederick (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Montgomery, TX 77356	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Danford, John (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Montgomery, TX 77356	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davis, Lisa (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Willis, TX 77318	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davis, Portia (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Montgomery, TX 77356	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Del Tatto, Karen (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Montgomery, TX 77356	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/8 Rpt: 7/20
<b>2</b> FILER NAME Montgomery County Republican Party of Texas (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00015765
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Etwop, Martin (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Conroe, TX 77385	
<b>8</b> Principal occupation / Job title (See Instructions) Attorney at Law		<b>9</b> Employer (See Instructions) Etwop Law Firm, PLLC
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gastineau, Paul (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Magnolia, TX 77365	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) CenterPoint Energy
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haag, Theresa (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Spring, TX 77386	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henery, Neda (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Conroe, TX 77384	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hord, Lonna (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Montgomery, TX 77316	
Principal occupation / Job title (See Instructions) Grant Consultant		Employer (See Instructions) Self-employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/8 Rpt: 8/20
<b>2</b> FILER NAME Montgomery County Republican Party of Texas (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00015765
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hyde, George (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Spring, TX 77386	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
<b>Date</b> 10/11/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Inman, Dale (Rev.)	<b>Amount of Contribution (\$)</b> \$20.22
	<b>Contributor address; City; State; Zip Code</b>  Conroe, TX 77304	
<b>Principal occupation / Job title (See Instructions)</b> Pastor & Rancher		<b>Employer (See Instructions)</b> Woodlands Bible Church
<b>Date</b> 10/10/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones , Karon (Ms.)	<b>Amount of Contribution (\$)</b> \$82.00
	<b>Contributor address; City; State; Zip Code</b>  Willis, TX 77318	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 10/09/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lawrence, Steve (Mr.)	<b>Amount of Contribution (\$)</b> \$24.24
	<b>Contributor address; City; State; Zip Code</b>  The Woodlands , TX 77381	
<b>Principal occupation / Job title (See Instructions)</b> Pilot		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 10/04/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McRae, Tammy (Ms.)	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  Conroe, TX 77301	
<b>Principal occupation / Job title (See Instructions)</b> Tax Assessor-Collector		<b>Employer (See Instructions)</b> Montgomery County, Texas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/8 Rpt: 9/20
<b>2</b> FILER NAME Montgomery County Republican Party of Texas (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00015765
<b>4</b> Date 10/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Millen, Brigetta (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Montgomery, TX 77316	
<b>8</b> Principal occupation / Job title (See Instructions) Legis. Coordinator		<b>9</b> Employer (See Instructions) Act for America
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mong, Richard (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Montgomery, TX 77356	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olinde, Robert (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Magnolia, TX 77354	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pope, Shirley (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Stagecoach, TX 77355	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Railey, Lisa (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Montgomery, TX 77316	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) JM Henry Corp.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/8 Rpt: 10/20
<b>2</b> FILER NAME Montgomery County Republican Party of Texas (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00015765
<b>4</b> Date 10/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schluter, John (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Conroe, TX 77303	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shirley, Charles (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Spring, TX 77386-1890	
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Aidan Capital Management
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shirley, Charles (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Spring, TX 77386-1890	
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Aidan Capital Management
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spiller, Ron (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  The Woodlands, TX 77380	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Teague, Kenny (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Conroe, TX 77384	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Bell Techlogix, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/8 Rpt: 11/20
<b>2</b> FILER NAME Montgomery County Republican Party of Texas (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00015765
<b>4</b> Date 10/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thornton, Twain (Mr.)	<b>7</b> Amount of Contribution (\$)  \$94.00
	<b>6</b> Contributor address; City; State; Zip Code  Magnolia, TX 77354	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thorton, Brandy (Ms.)	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Magnolia, TX 77354	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) VonRoble, Richard (Mr.)	Amount of Contribution (\$)  \$20.22
	Contributor address; City; State; Zip Code  Spring, TX 77386	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) VonRoble Consulting, Inc.
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wertz, John (Mr.)	Amount of Contribution (\$)  \$23.23
	Contributor address; City; State; Zip Code  Spring, TX 77382	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Craig (Mr.)	Amount of Contribution (\$)  \$38.00
	Contributor address; City; State; Zip Code  Magnolia, TX 77354	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/8 Rpt: 12/20
<b>2</b> FILER NAME Montgomery County Republican Party of Texas (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00015765
<b>4</b> Date 10/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Herschel (Mr.)	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  Montgomery, TX 77356	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
<b>Date</b> 10/15/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Jay (Judge)	<b>Amount of Contribution (\$)</b> \$20.20
	<b>Contributor address; City; State; Zip Code</b>  Conroe, TX 77302	
<b>Principal occupation / Job title (See Instructions)</b> Justice		<b>Employer (See Instructions)</b> Ninth Court of Appeals
<b>Date</b> 10/07/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zeller, Karen (Ms.)	<b>Amount of Contribution (\$)</b> \$91.00
	<b>Contributor address; City; State; Zip Code</b>  Conroe, TX 77304	
<b>Principal occupation / Job title (See Instructions)</b> Nurse		<b>Employer (See Instructions)</b> Retired

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/7 Rpt: 13/20	<b>2</b> FILER NAME Montgomery County Republican Party of Texas (CEC)	<b>3</b> Filer ID (Ethics Commission Filers) 00015765
<b>4</b> Date 10/07/2024	<b>5</b> Payee name 4ImPrint	
<b>6</b> Amount (\$) \$617.25	<b>7</b> Payee address; City; State; Zip Code 101 Commerce Street  Oshkosh, WI 54901	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office expense -- pens for the office.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/25/2024	Payee name Aguilar, Art (Mr.)	
Amount (\$) \$1,200.00	Payee address; City; State; Zip Code 18001 Hwy 105 West Suite 102 Montgomery, TX 77316	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly office rent -- MCTXGOP office rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/17/2024	Payee name CAZ Consulting LLC	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 6255 Willers Way  Houston, TX 77057	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV -- consulting expense/text messaging service.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/7 Rpt: 14/20	<b>2</b> FILER NAME Montgomery County Republican Party of Texas (CEC)	<b>3</b> Filer ID (Ethics Commission Filers) 00015765
<b>4</b> Date 10/17/2024	<b>5</b> Payee name CAZ Consulting LLC	
<b>6</b> Amount (\$) \$5,000.00	<b>7</b> Payee address; City; State; Zip Code 6255 Willers Way  Houston, TX 77057	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV -- consulting expense/text messaging service.
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/18/2024	Payee name CAZ Consulting LLC	
Amount (\$) \$4,163.00	Payee address; City; State; Zip Code 6255 Willers Way  Houston, TX 77057	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV -- consulting expense/text messaging service.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/21/2024	Payee name CAZ Consulting LLC	
Amount (\$) \$1,745.00	Payee address; City; State; Zip Code 6255 Willers Way  Houston, TX 77057	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV -- consulting expense/text messaging service.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/7 Rpt: 15/20	<b>2</b> FILER NAME Montgomery County Republican Party of Texas (CEC)	<b>3</b> Filer ID (Ethics Commission Filers) 00015765
<b>4</b> Date 09/30/2024	<b>5</b> Payee name Calendar Whiz	
<b>6</b> Amount (\$) \$15.00	<b>7</b> Payee address; City; State; Zip Code 8 Clackson Street  New York, NY 10014	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software fees.
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/17/2024	Payee name Constant Contact	
Amount (\$) \$106.86	Payee address; City; State; Zip Code 1601 Trapelo Road  Waltham, MA 02451	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software fees.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/02/2024	Payee name G3 Direct Consulting Inc	
Amount (\$) \$14,284.04	Payee address; City; State; Zip Code 2211 Rayford Road  Spring, TX 77386	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage expense - 38,477 GOP Voter Guide postage.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 4/7 Rpt: 16/20	<b>2</b>	FILER NAME Montgomery County Republican Party of Texas (CEC)	<b>3</b>	Filer ID (Ethics Commission Filers) 00015765
<b>4</b>	Date 10/03/2024	<b>5</b>	Payee name Marriott Waterway		
<b>6</b>	Amount (\$) \$6,756.21	<b>7</b>	Payee address; City; State; Zip Code 1601 Lake Robbins Drive  The Woodlands, TX 77380		
<b>8</b>	PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense --Hotel rental expense --VIP room expenses, remaining balance -- Lincoln Reagan		
<b>9</b>		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/16/2024		Payee name NSA Storage		
	Amount (\$) \$113.00		Payee address; City; State; Zip Code 18455 Hwy 105 West  Montgomery, TX 77356		
	PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage space rental.		
		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/05/2024		Payee name Office Max		
	Amount (\$) \$9.73		Payee address; City; State; Zip Code 1680 Lake Woodlands Drive  The Woodlands, TX 77380		
	PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing expense -- voter guides		
		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 5/7 Rpt: 17/20	<b>2</b>	FILER NAME Montgomery County Republican Party of Texas (CEC)	<b>3</b>	Filer ID (Ethics Commission Filers) 00015765
<b>4</b>	Date 10/25/2024	<b>5</b>	Payee name PayPal		
<b>6</b>	Amount (\$) \$4.41	<b>7</b>	Payee address; City; State; Zip Code 2211 N. 1st Street  San Jose, CA 95131		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software fees.		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/18/2024		Payee name Quik Pics Portrait Studio		
	Amount (\$) \$254.00		Payee address; City; State; Zip Code 25329 Budde Road Suite 604 The Woodlands, TX 77380		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election literature for November 2024 election.		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/09/2024		Payee name Reichert, Logan (Ms.)		
	Amount (\$) \$7,930.00		Payee address; City; State; Zip Code 106 Tehama Place  Montgomery, TX 77316		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising expense -- commission on contributions raised.		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/7 Rpt: 18/20	<b>2</b> FILER NAME Montgomery County Republican Party of Texas (CEC)	<b>3</b> Filer ID (Ethics Commission Filers) 00015765
<b>4</b> Date 10/08/2024	<b>5</b> Payee name South County Signs	
<b>6</b> Amount (\$) \$37.89	<b>7</b> Payee address; City; State; Zip Code 26111 I-45 North  The Woodlands, TX 77380	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event expense -- printing of menus -- for Lincoln Reagan Dinner.
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Squarespace, Inc.	
Amount (\$) \$30.89	Payee address; City; State; Zip Code 225 Varick Street 12th Floor New York, NY 10014	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software fees.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2024	Payee name Sticker Mule	
Amount (\$) \$205.74	Payee address; City; State; Zip Code 336 Forest Ave  Amsterdam, NY 12010	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software fees.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/7 Rpt: 19/20	<b>2</b> FILER NAME Montgomery County Republican Party of Texas (CEC)	<b>3</b> Filer ID (Ethics Commission Filers) 00015765
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<b>4</b> Date 10/25/2024	<b>5</b> Payee name Stripe
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<b>6</b> Amount (\$) \$146.92	<b>7</b> Payee address; City; State; Zip Code 510 Townsend Street  San Francisco, CA 94103-4918
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software fees.
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/09/2024	Payee name TWFG Insurance
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Amount (\$) \$864.29	Payee address; City; State; Zip Code 1201 Lake Woodlands Drive, Suite 4020 The Woodlands, TX Suite 4020 The Woodlands, TX 77380
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Insurance expense for MCTXGOP headquarters.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 1/1 Rpt: 20/20
<b>2</b> FILER NAME Montgomery County Republican Party of Texas (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00015765
<b>4</b> Date 09/30/2024	<b>5</b> Name of person from whom amount is received Sunflower Bank	<b>8</b> Amount (\$) \$0.83
	<b>6</b> Address of person from whom amount is received; City; State; Zip Code  Shenandoah, TX 77381	
	<b>7</b> Purpose for which amount is received Interest	<input type="checkbox"/> Check if political contribution returned to filer