COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

FORM CEC COVER SHEET PG 1

Tł	ne CEC Instruction Gui	ide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00067173		2 Total pages filed:	
3	COMMITTEE NAME				OFFICE U	SE ONLY
	Victoria County Rep	ublican Party (CEC)			Date Received RECE	IVED
4	COMMITTEE ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CIT 115 S Main St Victoria, Texas 77901	Y; STATE;	ZIP CODE	OCT 30 Texas Ethics Date Hand-delivered o	2024 Commission
5	CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Mr. Dale D		MI .		Amount \$
		NICKNAME LAST Zuck		SUFFIX	Date Imaged	2024
6	CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUIT 168 Casa Blanca Dr Inez, Texas 77968	E#; CITY;	STATE;	ZIP CODE	
7	CAMPAIGN TREASURER MAILING ADDRESS Change of Address	STREET ADDRESS OR PO BOX; APT / SUIT 168 Casa Blanca Dr Inez, Texas 77968	E#; CITY;	STATE;	ZIP CODE	
8	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (361) 564-6002	EXTENSION	l		
9	REPORT TYPE	July 15 X 8tl	th day before election n day before election		Final Report 10th day after campaign termination	treasurer
10	PERIOD COVERED	Month Day Year 07 / 15 / 2024	THROUGH		Month Day 10 / 29	Year ∕ 2024
11	ELECTION	ELECTION DATE Month Day Year Primary 11 05 2024 X General	ELE Runoff Special		ther escription—	
		GO TO PA	AGE 2			

Forms provided by Texas Ethics Commission

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COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME	enublican Bowty (CEC)	1	3 Filer ID (Ethics Commission Filers) 00067173		
victoria County R	epublican Party (CEC)				
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)	applicable, classify by party.)	B. Opposed			
, , ,	Measures (Describe by date and	A. Supported Get out the Vote, General Election 2	2024; Digital billboards, Republican		
	location of election and nature of issue.)	B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Republican get out the vote via billbo	pards, meetings, hosting forums		
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, OF	OLITICAL CONTRIBUTIONS (OTHER THAN R GUARANTEES OF LOANS, OR DE ELECTRONICALLY)	\$ 0.00		
	Check here if this repo	ort qualifies for the higher itemization thresl	hold		
	2. TOTAL POLITICAL C	CONTRIBUTIONS ES, LOANS, OR GUARANTEES OF LOANS)	\$ 8634.44		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED P	\$			
	4. TOTAL POLITICAL E	\$ 14,810.04			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CON OF THE REPORTING F	\$ 13,936.23			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AM- LAST DAY OF THE RE	OUNT OF ALL OUTSTANDING LOANS AS O PORTING PERIOD	F THE \$ 0.00		
		alty of perjury, that the accompanyin			
		Dale D Zuck Signature of Campain	ın Treasurer (Declarant)		
	D .		in measurer (Beciarant)		
	Please co	omplete either option below:			
(1) Affidavit					
AFFIX NOTARY STAMP /	SEALABOVE				
Sworn to and subscrib	oed 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					
OR					
(2) Unsworn Declarat	ion				
My name is <u>Dale D Zucl</u>	K	and my date of birth is			
My address is168 Cas	a Blanca Dr (street)	, <u>Inez</u> (city) (s	Tx , 77968 , USA tate) (zip code) (country)		
Executed in Victoria	County, State of Texas		<u>024.</u> nth) (year)		
		Dale D Zuck			
		Signature of Ca	ampaign Treasurer (Declarant)		

SUBTOTALS-CEC

FORM CEC COVER SHEET PG 3

17	COMMITTEE NAME Victoria CountyRepublican Party (CEC) 18 Filer ID (Ethics Con 00067173			ion Filers)	
19	SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT	
1.	X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	8,634.44	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS				
4.	SCHEDULE E: LOANS	\$			
5.	X SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL COI	NTRIBUTIONS	\$	14,810.04	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL (\$	0		
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	00	
9.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	0	
10.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIO TO FILER	NS RETURNED	\$	0	

SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

	The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2	FILER NAME Victoria	County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00067173
4	Date	5 Full name of contributor	7 Amount of contribution (\$)
	08/22/24	6 Contributor address; City; State; Zip Code Victoria, Texas 77905	\$12.00
8	Principal occu	pation / Job title (See Instructions) Retired 9 Employer (See Instructions)	ructions)
	Date	Full name of contributor	Amount of contribution (\$)
	20.00	Contributor address; City; State; Zip Code Victoria, Texas 77905	\$20.00
	Principal occup	eation / Job title (See Instructions) Retired Employer (See Instructions)	uctions)
	Date	Full name of contributor	Amount of contribution (\$)
	08/23/2024	Contributor address; City; State; Zip Code Victoria, Texas 77905	\$40.00
	Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	ructions)
	Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
	9/10/2024	Contributor address; City; State; Zip Code Victoria, Texas 77905	\$59.00
	Principal occup	nation / Job title (See Instructions) N/A Employer (See Instructions)	ructions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how	to complete this	s form.	1 Total pages Schedule A1:	
2 FILER NAME VICTOR	A COUNTY REPUBLICAN PARTY	3 Filer ID (Ethics Commission Filers) 00067173			
4 Date	5 Full name of contributor Foriborz Gorouhi		C (ID#:)	7 Amount of contribution (\$)	
8/21/2024	6 Contributor address; Victoria, Tx	City;	State; Zip Code	\$1000.00	
8 Principal occu Physician	pation / Job title (See Instructions)		9 Employer (See Instruc Citizens Medical Cent		
	Full name of contributor	□ out-of-state PAC	C (ID#:)		
Date	Margaret Rosenquest			Amount of contribution (\$)	
8/29/2024	Contributor address;	City;	State; Zip Code	4	
Victoria, Texas 77904				\$52.00	
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Date	Full name of contributor	out-of-state PAC	C (ID#:)		
Date	Louis Winslow			Amount of contribution (\$)	
9/10/2024	Contributor address;	City;	State; Zip Code	\$135.00	
	Cuero, Tex	kas 77954			
Principal occup	nation / Job title (See Instructions) Retired NA		Employer (See Instruc	tions)	
	Full name of contributor	out-of-state PAC	C (ID#:)		
Date	Sharon Derrington			Amount of contribution (\$)	
8/29/2024	Contributor address;	City;	State; Zip Code	\$15.00	
	Victoria,	Texas 77902			
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)	

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains ho	ow to complete this	s form.		1 Total pages Schedule A1:
2 FILER NAME VICTO	RIA COUNTY REPUBLICAN PA	3 Filer ID (Ethics Commission Filers) 00067173			
4 Date	5 Full name of contributor			7 Amount of contribution (\$)	
9/12/2024	6 Contributor address;	City;		Zip Code	20.00
8 Principal occu	pation / Job title (See Instruction	s)	9 Employ	ver (See Instruct	tions)
Date 9/16/2024	Full name of contributor Katherine Harrod	out-of-state PAC			Amount of contribution (\$)
	Contributor address;	City; Texas 77904		Zip Code	24.00
Principal occup	pation / Job title (See Instructions Retired Teacher	;)	Employ	rer (See Instruct	ions)
Date	Full name of contributor DA Heiser	out-of-state PAC			Amount of contribution (\$)
9/17/2024	Contributor address; Vict	City; toria, Texas 77905	State; Z		20.00
Principal occup	oation / Job title (See Instructions	5)	Employ	rer (See Instruct	tions)
	Retired				
Date	Full name of contributor	out-of-state PAC			Amount of contribution (\$)
	Contributor address;	City;	State; Z		
Principal occup	Dation / Job title (See Instructions	5)	Employ	rer (See Instruct	tions)

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SCHEDULE A1

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	The	Instruction Guide explains how	1 Total pages Schedule A1:		
2	FILER NAME VICTO	ORIA COUNTY REPUBLICAN PAR	3 Filer ID (Ethics Commission Filers) 00067173		
4	Date 09/16/2024	ate 5 Full name of contributor out-of-state PAC (ID#:) Patricia Teinert			7 Amount of contribution (\$) \$5.00
		6 Contributor address; Victoria,	City; texas 77904	State; Zip Code	\$ 0.00
8	Principal occu	pation / Job title (See Instructions))	9 Employer (See Inst	uctions)
	Date	Full name of contributor Rhonda Templin	out-of-state PAG	C (ID#:	Amount of contribution (\$)
	9/18/2024	Contributor address; Nursery, texas 7	City;	State; Zip Code	\$81.00
	Principal occup	ation / Job title (See Instructions)		Employer (See Insti	uctions)
	Date	Full name of contributor Paula Robinson	out-of-state PAG	C (ID#:	Amount of contribution (\$)
	9/24/2024	Contributor address; Victoria,	City; Texas 77903	State; Zip Code	100.00
	Principal occup	vation / Job title (See Instructions)		Employer (See Inst	uctions)
	Date	Full name of contributor J U Woodburn	out-of-state PAG	C (ID#:	Amount of contribution (\$)
	9/24/2024	Contributor address; Victoria, Te	City;	State; Zip Code	29.00
	Principal occup	pation / Job title (See Instructions) Unknown		Employer (See Inst	uctions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

	The	Instruction Guide explains how to complete this f	1 Total pages Schedule A1:	
2	FILER NAME	DRIA COUNTY REPUBLICAN PARTY (CEC	3 Filer ID (Ethics Commission Filers) 00067173	
4	Date 5 Full name of contributor			7 Amount of contribution (\$)
	9/19/2024	6 Contributor address; City; Victoria, Texas 77901	State; Zip Code	\$40.00
8	Principal occu	pation / Job title (See Instructions) u/K	Employer (See Instruct	ions)
	Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of contribution (\$)
	9/25/2024	Contributor address; City; Nordheim Texas 78141	State; Zip Code	\$218.00
		nation / Job title (See Instructions) r Dewitt County Party	ions)	
	Date	Full name of contributor	D#:)	Amount of contribution (\$)
	10/1/2024	Contributor address; City; Victoria, Texas 77902	State; Zip Code	\$26.00
	Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
	Date	Full name of contributor out-of-state PAC (II Eduardo A Brugo	D#:)	Amount of contribution (\$)
	10/1/2024	Contributor address; City; Victroria, Texas 77901	State; Zip Code	\$136.00
	Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

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Instruction Guide explains how to complete th	is form.	1 Total pages Schedule A1:			
DRIA COUNTY REPUBLICAN PARTY (CEC	3 Filer ID (Ethics Commission Filers) 00067173				
5 Full name of contributor out-of-state PAC (ID#:) Jamie Johnson		7 Amount of contribution (\$)			
6 Contributor address; City;	State; Zip Code	14.00			
pation / Job title (See Instructions)	9 Employer (See Instruc	tions)			
Kenneth Rippstein		Amount of contribution (\$)			
Contributor address; City;	State; Zip Code	12.00			
Principal occupation / Job title (See Instructions) Retired Employer (See Instructions)					
Full name of contributor	AC (ID#:)	A			
Elmer Tanya Deforest		Amount of contribution (\$)			
Contributor address; City;	State; Zip Code	35.00			
Seadrift, Texas 77983					
pation / Job title (See Instructions)	Employer (See Instruc	tions)			
_	AC (ID#:)	Amount of contribution (\$)			
	State; Zip Code	\$24.00			
Victoria, Texas 77905					
pation / Job title (See Instructions) Retired	Employer (See Instruc	tions)			
	ORIA COUNTY REPUBLICAN PARTY (CEC 5 Full name of contributor	Seadrift, Texas 77983 State: Zip Code Seadrift, Texas 77905 State: Zip Code State: Zip Code			

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SCHEDULE A1

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	The	Instruction Guide explains hov	v to complete this	s form.	1 Total pages Schedule A1:
2	FILER NAME VICTO	DRIA COUNTY REPUBLICAN PAI	3 Filer ID (Ethics Commission Filers) 00067173		
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Samuel Leos			7 Amount of contribution (\$)	
		6 Contributor address; Victor	City; oria, Texas 77904	State; Zip Code	5.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	ctions)
	Date	Full name of contributor Connie Waldorff	out-of-state PAG	C (ID#:)	Amount of contribution (\$)
	10/4/2024	Contributor address;	City; , Tx 77905	State; Zip Code	\$100.00
	Principal occup	ation / Job title (See Instructions)		Employer (See Instruc	tions)
	Date	Full name of contributor Martha Saldana	out-of-state PAG	C (ID#:)	Amount of contribution (\$)
	10/4/2024	Contributor address; Victoria	City; a, Texas 77905	State; Zip Code	\$11.00
	Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
	Date	Full name of contributor Kathy Stimson	out-of-state PAG	C (ID#:)	Amount of contribution (\$)
	10/4/2024	Contributor address; Victo	City;	State; Zip Code	25.00
	Principal occup	pation / Job title (See Instructions) Self employed		Employer (See Instruc	ctions)

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Instruction Guide explains how	v to complete this	s form.	1 Total pages Schedule A1:		
DRIA COUNTY REPUBLICAN PAI	3 Filer ID (Ethics Commission Filers) 00067173				
5 Full name of contributor		7 Amount of contribution (\$)			
6 Contributor address;	City;	State; Zip Code	15.00		
 pation / Job title (See Instructions)	9 Employer (See Instruc	tions)		
Full name of contributor Kyler Hornstein	out-of-state PA	C (ID#:)	Amount of contribution (\$)		
Contributor address;	City;	State; Zip Code	64.00		
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)		
Contributor address;	City;	State; Zip Code	\$84.00		
 pation / Job title (See Instructions) SEIf Employed		Employer (See Instruc	 ctions)		
Full name of contributor Nita Smith	out-of-state PA	C (ID#:)	Amount of contribution (\$)		
Contributor address;	City;	State; Zip Code	\$48.00		
Principal occupation / Job title (See Instructions) Unknown			 ctions)		
	5 Full name of contributor David Pribyl 6 Contributor address; Victor Pation / Job title (See Instructions) Full name of contributor Kyler Hornstein Contributor address; Pation / Job title (See Instructions) Full name of contributor Liz Heiser Contributor address; Victor SElf Employed Full name of contributor Nita Smith Contributor address; Victori Pation / Job title (See Instructions)	DRIA COUNTY REPUBLICAN PARTY (CEC 5 Full name of contributor	5 Full name of contributor		

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SCHEDULE A1

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The	Instruction Guide explains how to complete t	this form.	1 Total pages Schedule A1:		
2 FILER NAME VICTO	DRIA COUNTY REPUBLICAN PARTY (CEC	3 Filer ID (Ethics Commission Filers) 00067173			
4 Date	5 Full name of contributor	7 Amount of contribution (\$)			
9/24/2024	6 Contributor address; City; Victoria, Tx 77905	State; Zip Code	\$300.00		
	Victoria, 1x 77905				
8 Principal occu Ve	pation / Job title (See Instructions) t Tech	9 Employer (See Instruc Hillcrest Animal Hospit	tions) tal		
Date	Full name of contributor ut-of-state	PAC (ID#:)	Amount of contribution (\$)		
	Kay Tomanek		` ,		
9/24/24	Contributor address; City;		\$15		
	Victoria, Texas	ciaic, Eip couc			
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Date	Full name of contributor ut-of-state	PAC (ID#:)	Amount of contribution (\$)		
	Kelly Standford		Amount of contribution (\$)		
9/24/24	Contributor address; City;	State; Zip Code	\$49.00		
	Victoria, texas 77901				
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)		
	Self Employed	C&D Used Auto Part	s		
Date	Full name of contributor out-of-state	PAC (ID#:)	Amount of contribution (\$)		
9/25/24					
0/20/21	Contributor address; City;	State; Zip Code	\$20.00		
	Goliad Tx 77963				
Principal occu	pation / Job title (See Instructions) Unknown	Employer (See Instruc	tions)		

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

RIA COUNTY REPUBLICATION And the contributor Maggie Rincon Mattributor address;	Out-of-state PA	AC (ID#:)	Total pages Schedule A1: Filer ID (Ethics Commission Filers) 00067173 Amount of contribution (\$)
name of contributor Maggie Rincon ntributor address;	out-of-state PA	,	00067173
Maggie Rincon htributor address;		,	7 Amount of contribution (\$)
ntributor address;			
	xas 77901	State; Zip Code	\$15.00
Job title (See Instructions elf Employed)	9 Employer (See Instruc Rincon Restaurant	! ctions)
	out-of-state PA	AC (ID#:)	Amount of contribution (\$)
ntributor address;	City;	State; Zip Code	\$52.00
,		Employer (See Instruc	tions)
name of contributor Debbie Varty	out-of-state PA	AC (ID#:)	Amount of contribution (\$)
ntributor address;	City;	State; Zip Code	\$43.00
lob title (See Instructions)			
name of contributor Kathy Stimson	out-of-state PA	AC (ID#:)	Amount of contribution (\$)
	City;	State; Zip Code	\$81.00
lob title (See Instructions)		Employer (See Instruc	 ctions)
	ob title (See Instructions) ired name of contributor Debbie Varty ntributor address; Victoria, Tx	avid Dood Intributor address; City; Victoria, Tx 77901 Ob title (See Instructions) Ired Iname of contributor	avid Dood Intributor address; City; State; Zip Code Victoria, Tx 77901 Ob title (See Instructions) Ired Iname of contributor Victoria, Tx 77904 Iname of contributor Inam

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SCHEDULE A1

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	The Instruction Guide explains how to complete this form.					1	Total pages Schedule A1:
2	2 FILER NAME VICTORIA COUNTY REPUBLICAN PARTY (CEC					3	Filer ID (Ethics Commission Filers) 00067173
4	Date	5 Full name of contributor Bob Harriad	out-of-state PAC	C (ID#:)	7	Amount of contribution (\$)
	9/26/24						\$36.00
		6 Contributor address;	City;	State;	Zip Code		
	Victoria, Texas 77901						
8		 pation / Job title (See Instructions elf employed	5)	9 Empl	oyer (See Instruc	tions)
	D-4-	Full name of contributor	out-of-state PAC	(ID#:)		
	Date	Melissa Manning					Amount of contribution (\$)
	9/26/2024						
	0/20/2024	Contributor address;	City;	State;	Zip Code		\$28.00
		Victoria	a, Texas 77904				
	Principal occupation / Job title (See Instructions) Employer (See Instructions)			tions)		
	Date	Full name of contributor	out-of-state PAC	C (ID#:)		Amount of contribution (\$)
		Jackie Mantana					Amount of contribution (\$)
	9/27/2024	Contributor address;	City;		Zip Code		\$43.00
		,	Victoria, Texa				Ф4 3.00
	Principal occup	nation / Job title (See Instructions Teacher)		oyer (See Instruct ISD	tions)
	Date	Full name of contributor	out-of-state PAC	C (ID#:)		Λ
	Dato	Lynn Lueckemey	er				Amount of contribution (\$)
	9/27/2024	Contributor address;	City;	State:	Zip Code		\$67.00
			, Tx 77905	ŕ	·		467.00
	Principal occup	pation / Job title (See Instructions)	Empl	oyer (See Instruc	tions)
				1			

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SCHEDULE A1

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	The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2	FILER NAME	IAME VICTORIA COUNTY REPUBLICAN PARTY (CEC		3 Filer ID (Ethics Commission Filers) 00067173
4	Date	5 Full name of contributor	7 Amount of contribution (\$)	
	9/27/2024	6 Contributor address; City; Victoria, tx 77902	State; Zip Code	71.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
	Date Full name of contributor		(ID#:)	Amount of contribution (\$)
	10/1/24	Contributor address; City; Victoria, Texas 77905	State; Zip Code	38.00
Principal occupation / Job title (See Instructions) REsearcher Detar Hospital			ions)	
	Date Full name of contributor out-of-state PAC (ID#:) Stephanie Ferguson		(ID#:)	Amount of contribution (\$)
	10/1/24	Contributor address; City; Victoria, Texas 7790	State; Zip Code	\$39.00
	Principal occup	pation / Job title (See Instructions) REaltor	Employer (See Instruct EXP Realty	ions)
	Date	Full name of contributor out-of-state PAC Brenden Hare	(ID#:)	Amount of contribution (\$)
	10/1	Contributor address; City; Victoria, Texas 7790	State; Zip Code	\$17.00
	Principal occupation / Job title (See Instructions) Electrician Employer (See Instructions) Rexel			tions)
	Electr	ician	Kexei	

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SCHEDULE A1

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	The Instruction Guide explains how to complete this	s form.	1 Total pages Schedule A1:	
2 FILER NA	ME VICTORIA COUNTY REPUBLICAN PARTY (CEC		3 Filer ID (Ethics Commission Filers) 00067173	
4 Date	5 Full name of contributor			
10/18/20	6 Contributor address; City; Victoria, Texas 7	State; Zip Code	\$61.00	
8 Principal	occupation / Job title (See Instructions)	9 Employer (See Instruc	tions)	
	Retired			
	Full name of contributor	C (ID#:)		
Date	Dianna Rippstein	C (ID#)	Amount of contribution (\$)	
10/18/2024				
	Contributor address; City; Yorktown, Texas 78169	State; Zip Code	\$33.00	
Principal c	ccupation / Job title (See Instructions) Realtor	Employer (See Instruct Yorktown Realty		
Date	Full name of contributor out-of-state PA	C (ID#:)	Amount of contribution (\$)	
			\$55.00	
10/18/20	Contributor address; City; Victoria, Texas7790	State; Zip Code	ψ00.00	
Principal o	ccupation / Job title (See Instructions) Retired	Employer (See Instruct	tions)	
	Full name of contributor	C (ID#:)		
Date	Edward Heller		Amount of contribution (\$)	
10/18	/2024 Contributor address; City;	State; Zip Code	\$20.00	
		Texas 77905		
Principal o	ccupation / Job title (See Instructions) Accounting	Employer (See Instruction Heller and Heller	tions)	

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SCHEDULE A1

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	The	nstruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2	FILER NAME	VICTORIA COUNTY REPUBLICAN PARTY (CE	:c	3 Filer ID (Ethics Commission Filers) 00067173
4	5 Full name of contributor			7 Amount of contribution (\$)
	10/18/202	6 Contributor address; City; Victoria, Tx 77901	State; Zip Code	\$20.00
8		ation / Job title (See Instructions) cher	9 Employer (See Instruct VISD	ions)
	Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	10/18/2024	Contributor address; City; Victoria, Texas 77905	State; Zip Code	\$32.00
	Principal occup	ation / Job title (See Instructions) Self Employed	Employer (See Instruct	ions)
	Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	8/19/2024	Contributor address; City; Victoria, Tx 77905	State; Zip Code	\$98.00
	Principal occup	ation / Job title (See Instructions) Retired	Employer (See Instruct	ions)
	Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
	10/2/2024	Contributor address; City; Westhoff, texas 77994	State; Zip Code	\$84.00
	Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

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	The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1:
2	FILER NAME	VICTORIA COUNTY REPUBLICAN PARTY (CEC		3 Filer ID (Ethics Commission Filers) 00067173
4	Date	Janice Ohrt	D#:)	7 Amount of contribution (\$)
	10/18/2024 6 Contributor address; City; State; Zip Code Victoria, Texas 77905			100.00
8		pation / Job title (See Instructions) cher	Employer (See Instructi	ons)
	Date	Full name of contributor	D#:)	Amount of contribution (\$)
	10/11/2024	Contributor address; City; Victoria, Texas 77904	State; Zip Code	\$48.00
	Principal occup	ation / Job title (See Instructions) Self Employed	Employer (See Instructi	ons)
	Date	Full name of contributor	D#:)	Amount of contribution (\$)
	10/17/2024	Contributor address; City; Westhoff, Texas 77994	State; Zip Code	\$103.00
	Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
	Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of contribution (\$)
	10/16/24	Contributor address; City; Port Lavaca, Texas 77979	State; Zip Code	\$108.00
	Principal occup	ration / Job title (See Instructions) REaltor	Employer (See Instructi Russell Cain Realty	ons)

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SCHEDULE A1

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The	Instruction Guide explains how to com	nplete this form.	1 Total pages Schedule A1:
2 FILER NAME	VICTORIA COUNTY REPUBLICAN F	PARTY (CEC	3 Filer ID (Ethics Commission Filers) 00067173
4 Date	5 Full name of contributor out Barbara Breazeale	7 Amount of contribution (\$)	
10/16/2024	6 Contributor address; Ci	\$108.00	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor	-of-state PAC (ID#:)	Amount of contribution (\$)
10/16/2024	Contributor address; Ci Port Lavaca, Tx 77979	ity; State; Zip Code	\$100.00
-	pation / Job title (See Instructions) munications	Employer (See Instruc	etions)
Date	Full name of contributor out	-of-state PAC (ID#:)	Amount of contribution (\$)
10/12/2024	Contributor address; Ci Port Lavaca, Texas 77979		88.00
Principal occu	 pation / Job title (See Instructions) CommunicATIONS	Employer (See Instruc Formosa Plastics	tions)
Date	Full name of contributor out	-of-state PAC (ID#:)	Amount of contribution (\$)
10/17/2024	Contributor address; Cit Victoria, Texas 77904		188.00
•	pation / Job title (See Instructions) elf employed	Employer (See Instruc	etions)

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SCHEDULE A1

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	The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:	
2	2 FILER NAME VICTORIA COUNTY REPUBLICAN PARTY (CEC			3 Filer ID (Ethics Commission Filers) 00067173	
4	Date	5 Full name of contributor	(ID#:)	7 Amount of contribution (\$)	
	10/17/2024	6 Contributor address; City; Victoria, Texas 77904	State; Zip Code	\$29.00	
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)	
	Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
	10/17/2024	Contributor address; City; Port Lavaca, Texas 77	State; Zip Code	\$110.00	
	Principal occup	ation / Job title (See Instructions) U/K	Employer (See Instruct	ions)	
	Date Full name of contributor		(ID#:)	Amount of contribution (\$)	
	10/17/2024	Contributor address; City; Port Lavaca, Texas 77979	State; Zip Code	\$100.00	
	Principal occup	vation / Job title (See Instructions) Realtor	Employer (See Instruct Russell Cain Realty		
	Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)	
	10/16/2024	Contributor address; City; Victoria, Texas 779	State; Zip Code	\$49.00	
	Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)	

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SCHEDULE A1

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	The	Instruction Guide explains how t	o complete this	form.	1 Total pages Schedule A1:
2	FILER NAME	VICTORIA COUNTY REPUBLI	3 Filer ID (Ethics Commission Filers) 00067173		
4	Date	5 Full name of contributor Laurin Tagliabue	out-of-state PAC	7 Amount of contribution (\$)	
	10/16/2024	6 Contributor address;	City;	State; Zip Code	\$15.00
		victoria,	Texas 77904		
8	Principal occu	oation / Job title (See Instructions) U/K		9 Employer (See Instruct	tions)
	Date	Full name of contributor Tom Schlein	out-of-state PAC	(ID#:)	Amount of contribution (\$)
	10/16/2024	Contributor address; Victoria, Tex	City;	State; Zip Code	\$20.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)				tions)	
	Date	Full name of contributor Carol Mueller	out-of-state PAC	(ID#:)	Amount of contribution (\$)
	10/16/2024	Contributor address; Victoria, Texas	City;	State; Zip Code	\$17.00
	Principal occup	ation / Job title (See Instructions)		Employer (See Instruct	tions)
		Retired			
	Date	Full name of contributor Brandon Moore	out-of-state PAC	(ID#:)	Amount of contribution (\$)
	10/15/2024	Contributor address;	City; Victoria, TExas 7	State; Zip Code 77905	\$40.00
	Principal occup	ation / Job title (See Instructions)		Employer (See Instruct	ctions)

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SCHEDULE A1

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The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	VICTORIA COUNTY REPUBLICAN PARTY (CEC	3 Filer ID (Ethics Commission Filers) 00067173
4 Date	5 Full name of contributor	7 Amount of contribution (\$)
10/15/2024	6 Contributor address; City; State; Zip C Victoria, Texas 77904	ode \$66.00
8 Principal occu	pation / Job title (See Instructions) U/K 9 Employer (S	ee Instructions)
Date	Full name of contributor	Amount of contribution (\$)
10/15/2024	Contributor address; City; State; Zip C Victoria, Texas 77901	ode \$100.00
Principal occu	pation / Job title (See Instructions) Employer (S	ee Instructions)
Date	Full name of contributor	Amount of contribution (\$)
10/15/2024	Contributor address; City; State; Zip C	\$106.00
Principal occu	pation / Job title (See Instructions) Retired Employer (S	ee Instructions)
Date	Full name of contributor out-of-state PAC (ID#: David Pribyl	Amount of contribution (\$)
10/15/2024	Contributor address; City; State; Zip Co	\$48.00
Principal occu	pation / Job title (See Instructions) Retired Employer (S	ee Instructions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how	to complete this	form.		1 Total pages Schedule A1:
2 FILER NAME	VICTORIA COUNTY REPUBI	LICAN PARTY (CE	EC		3 Filer ID (Ethics Commission Filers) 00067173
4 Date	5 Full name of contributor Kathy Williams	athy Williams			7 Amount of contribution (\$)
10/15/2024	6 Contributor address; Victora, Tex	City; (as 77904	State;		\$24.00
8 Principal occu	upation / Job title (See Instructions) U/K		9 Emplo	oyer (See Instruct	tions)
Date	Full name of contributor Pardis Mohebtash	out-of-state PAC			Amount of contribution (\$)
10/12/2024	Contributor address; Victo	City; oria, Texas 77904	State;	Zip Code	\$80.00
Principal occupation / Job title (See Instructions) Self Employed Employer (See Instructions)				tions)	
Date	Full name of contributor Marcia Kauffn	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
10/17/2024	Contributor address;	City; ia, Texas 77901		Zip Code	\$10.00
Principal occu	pation / Job title (See Instructions)		Emplo	yer (See Instruct	tions)
·	Sales		1	d Blessed	,
Date 10/17/2024	Full name of contributor Gail Hongeka	out-of-state PAC			Amount of contribution (\$)
	Contributor address; Victoria, T	City; Texas 77904		Zip Code	\$105.00
Principal occu	pation / Job title (See Instructions) REtired		Emplo	yer (See Instruct	tions)

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SCHEDULE A1

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	The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2	FILER NAME	VICTORIA COUNTY REPUBLICAN PARTY (CE	С	3 Filer ID (Ethics Commission Filers) 00067173
4	5 Full name of contributor			7 Amount of contribution (\$)
	10/18/2024	6 Contributor address; City; Victoria, Texas 77901	State; Zip Code	\$30.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
		ired		,
	Date	Full name of contributor out-of-state PAC Tony Salinas	(ID#:)	Amount of contribution (\$)
	40/47/202			\$17.00
	10/17/202	Contributor address; City;	State; Zip Code	\$17.00
		Victoria, Texas 77901		
		ation / Job title (See Instructions) Sales	Employer (See Instructi Sell Everything G	
	Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
		Contributor address; City;	State; Zip Code	
	Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
		Full name of contributor	(ID#:)	
	Date	Susie Motal	(15)1	Amount of contribution (\$)
				\$20.00
	10/17/2024	Contributor address; City;	State; Zip Code	·
		Victoria, Texas 77901		
	Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
	Adult Prol	pation	Victoria County	

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The	Instruction Guide explains how to compl	lete this form.	1 Total pages Schedule A1:
2 FILER NAME	VICTORIA COUNTY REPUBLICAN PA	RTY (CEC	3 Filer ID (Ethics Commission Filers) 00067173
4 Date	5 Full name of contributor	-state PAC (ID#:)	7 Amount of contribution (\$)
10/17/2024	6 Contributor address; City; Victoreia, Texas	State; Zip Code	\$10.00
•	pation / Job title (See Instructions)	9 Employer (See Instruc VicTORIA cOUN	The state of the s
Date 10/17/2024	Ron Chanek	-state PAC (ID#:)	Amount of contribution (\$)
10/1//2024	Contributor address; City; Victoria, Texas	; State; Zip Code	\$95.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc Center Point End	tions) Prgy
Date	Full name of contributor	-state PAC (ID#:)	Amount of contribution (\$)
10/17/2024	Contributor address; City; Victoria, Tx 779	State; Zip Code	\$15.00
Principal occup	oation / Job title (See Instructions) Self Employed	Employer (See Instruc	tions)
Date	Full name of contributor out-of-	-state PAC (ID#:)	Amount of contribution (\$)
10/17/2024	Contributor address; City; Victoria, Texs	State; Zip Code	\$22.00
Principal occup sales	pation / Job title (See Instructions)	Employer (See Instruc Sell everything gro	

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	The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FIL	ER NAME	VICTORIA COUNTY REPUBLICAN PARTY (CE	3 Filer ID (Ethics Commission Filers) 00067173	
4 Dat	te	5 Full name of contributor		7 Amount of contribution (\$)
•	9/10/24	6 Contributor address; City; Austin Tx	State; Zip Code	\$10.00
8 Prii	-	pation / Job title (See Instructions) ector	9 Employer (See Instruct Soor Control	tions)
Date	e	Full name of contributor	(ID#:)	Amount of contribution (\$)
	10/12/202	Contributor address; City; Victoria, Texas 77901	State; Zip Code	\$24.00
Principal occupation / Job title (See Instructions) Retired Employer (See Instructions)				ions)
Dat	te	Nita Smith	(ID#:)	Amount of contribution (\$)
1	10/12/2024	Contributor address; City; Victoria, Teexas 77904	State; Zip Code	\$92.00
Prin	ncipal occup	ation / Job title (See Instructions) Retired	Employer (See Instruct	tions)
Dat		Macie Louderback	(ID#:)	Amount of contribution (\$)
	10/10/202	Contributor address; City; Edna, Texas 779	State; Zip Code	\$16.00
Prin	ncipal occup	ation / Job title (See Instructions) Self Employed	Employer (See Instruct	tions)

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SCHEDULE A1

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	The	Instruction Guide explains how to complete this	1 Total pages Schedule A1:	
2	FILER NAME	VICTORIA COUNTY REPUBLICAN PARTY (CE	С	3 Filer ID (Ethics Commission Filers) 00067173
4	Date	5 Full name of contributor	(ID#:)	7 Amount of contribution (\$)
	10/12/2024	6 Contributor address; City; Victoria, Texas 77901	State; Zip Code	\$17.00
8	Principal occu	pation / Job title (See Instructions) Plumber	9 Employer (See Instruct Bentson Plumbing	tions)
	Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	10/12/2024	Contributor address; City; Victoria, Texas 77901	State; Zip Code	\$300.00
	Principal occup	ation / Job title (See Instructions) Manager	Employer (See Instruct Chock Hospital	ions)
	Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	10/16/2024	Contributor address; City; Victoria, Te	State; Zip Code	\$10.00
	Principal occup	vation / Job title (See Instructions)	Employer (See Instruct	tions)
	Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	10/16/2024	Contributor address; City; Victoria, Texas 77905	State; Zip Code	\$102.00
	Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
		Self Employed		

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SCHEDULE A1

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The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	VICTORIA COUNTY REPUBI	LICAN PARTY (CE	EC .	3 Filer ID (Ethics Commission Filers) 00067173
4 Date	Date 5 Full name of contributor			7 Amount of contribution (\$)
10/16/2024	6 Contributor address;	City;	State; Zip Code	\$84
8 Principal occu	pation / Job title (See Instructions)	,	9 Employer (See Instruc	ctions)
Date	Full name of contributor Joe Rainosek	out-of-state PAC	(ID#:)	Amount of contribution (\$)
10/15/2024	Contributor address; Victoria,	City; Texas 77904	State; Zip Code	\$100.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
	Preventive Maintenance		Invista	
Date	Full name of contributor Connie Perkins	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
10/15/2024	Contributor address; Victoria, Tex	City;	State; Zip Code	\$110.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
Date	Full name of contributor Lois Cazinha	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
10/15/2024	Contributor address;	City; Victoria, Texas 7	State; Zip Code	\$4000
Principal occu	pation / Job title (See Instructions) Fire Fighter		Employer (See Instruc City of Victoria	ctions)

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SCHEDULE A1

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The	Instruction Guide explains how to complete th	nis form.	1 Total pages Schedule A1:
2 FILER NAME	VICTORIA COUNTY REPUBLICAN PARTY (3 Filer ID (Ethics Commission Filers) 00067173	
4 Date	5 Full name of contributor	PAC (ID#:)	7 Amount of contribution (\$)
10/15/2024	6 Co City; Victoria, Texas	State; Zip Code s 77905	\$54.00
8 Principal occu	pation / Job title (See Instructions) REtired	9 Employer (See Instruc	tions)
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of contribution (\$)
10/16/2024	Contributor address; City; Victoria, Texas 7790	State; Zip Code	\$42.00
Principal occup	ation / Job title (See Instructions) Consultant	Employer (See Instruc Self Employed	tions)
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of contribution (\$)
10/16/2024	Contributor address; City; Livngston, Texas 703	State; Zip Code	!0.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of contribution (\$)
10/6/202	Contributor address; City; Victoria, Texas 77905	State; Zip Code	6.00
	pation / Job title (See Instructions) se Manager	Employer (See Instruc Self Employed	tions)

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SCHEDULE A1

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	The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FIL	ER NAME	VICTORIA COUNTY REPUBLICAN PARTY (CE	3 Filer ID (Ethics Commission Filers) 00067173	
4 Dat	te	5 Full name of contributor		7 Amount of contribution (\$)
•	9/10/24	6 Contributor address; City; Austin Tx	State; Zip Code	\$10.00
8 Prii	-	pation / Job title (See Instructions) ector	9 Employer (See Instruct Soor Control	tions)
Date	e	Full name of contributor	(ID#:)	Amount of contribution (\$)
	10/12/202	Contributor address; City; Victoria, Texas 77901	State; Zip Code	\$24.00
Principal occupation / Job title (See Instructions) Retired Employer (See Instructions)				ions)
Dat	te	Nita Smith	(ID#:)	Amount of contribution (\$)
1	10/12/2024	Contributor address; City; Victoria, Teexas 77904	State; Zip Code	\$92.00
Prin	ncipal occup	ation / Job title (See Instructions) Retired	Employer (See Instruct	tions)
Dat		Macie Louderback	(ID#:)	Amount of contribution (\$)
	10/10/202	Contributor address; City; Edna, Texas 779	State; Zip Code	\$16.00
Prin	ncipal occup	ation / Job title (See Instructions) Self Employed	Employer (See Instruct	tions)

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SCHEDULE A1

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The	Instruction Guide explains how	1	Total pages Schedule A1:		
2 FILER NAME	VICTORIA COUNTY REPUBL	3	3 Filer ID (Ethics Commission Filers) 00067173		
4 Date	5 Full name of contributor Ted Winslow	out-of-state PAC	: (ID#:) 7	7 Amount of contribution (\$)
10/16/2024	10/16/2024 6 Contributor address; City; State; Zip Code Cuero, Tx 77954			e	\$105.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See	Inatruction	20)
• Filicipal occu	Dentist		Dewitt Profession		
Date	Full name of contributor Ted Winslow		; (ID#:)	Amount of contribution (\$)
10/16/2024	Contributor address; Cuero, Texas	City;	State; Zip Code	e	\$48.00
Principal occup De	ation / Job title (See Instructions) entiest		Employer (See	Instruction	ns)
Date	Full name of contributor Barbara Breazeale		; (ID#:)	Amount of contribution (\$)
10/15/2024	Contributor address;	City;	State; Zip Code		\$87.00
		Victoria, Texas 7	7905		
Principal occup	pation / Job title (See Instructions)		Employer (See	Instruction	ns)
	Collections			ads Cons	
Date	Full name of contributor Virginia Hindman	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
	• • • • • • • • • • • • • • • • • • •				
10/16/2024	Contributor address; Victora, Te	City;	State; Zip Code	;	\$76.00
	·				
Principal occup	pation / Job title (See Instructions) Retired		Employer (See	Instruction	ns)

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SCHEDULE A1

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The	Instruction Guide explains how t	to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	VICTORIA COUNTY REPUBL	ICAN PARTY (CE	С	3 Filer ID (Ethics Commission Filers) 00067173
4 Date	5 Full name of contributor Melody Crabile	_	(ID#:	7 Amount of contribution (\$)
10/16/2024	6 Contributor address; Victoria, Texas	City;	State; Zip Code	\$29.00
8 Principal occu	pation / Job title (See Instructions) Teacher		9 Employer (See Inst Faith Academy	ructions)
Date	Full name of contributor Winston Wheeler	out-of-state PAC	(ID#:	Amount of contribution (\$)
10/16/2024	Contributor address; Victor	City; ia, Tex 77901	State; Zip Code	\$76.00
	pation / Job title (See Instructions) mber		Employer (See Inst Affordable Plumbi	· · · · · · · · · · · · · · · · · · ·
Date	Full name of contributor Rhonda Templeton		(ID#:	Amount of contribution (\$)
10/16/2024	Contributor address; Nursery Tx 7	City;	State; Zip Code	\$64.00
Principal occu	pation / Job title (See Instructions) School Resource Officer		Employer (See Inst Cuero PD	ructions)
Date	Full name of contributor Anne Blanchett	out-of-state PAC	(ID#:	Amount of contribution (\$)
10/16/2024	Contributor address; Point Comfort	City; Tx 77978	State; Zip Code	\$50.00
	pation / Job title (See Instructions) unication Consultant		Employer (See Inst	ructions)

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SCHEDULE A1

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	The	Instruction Guide explains how	to complete this	s form.	1 Total pages Schedule A1:
2	FILER NAME VICTORIA COUNTY REPUBLICAN PARTY (CEC				3 Filer ID (Ethics Commission Filers) 00067173
4	Date	Full name of contributor			7 Amount of contribution (\$)
	10/15/2024	6 Contributor address; Cuero, Tx 7	City;	State; Zip Code	\$97.00
8	Principal occu	pation / Job title (See Instructions) councilor		9 Employer (See Instruc Cuero ISD	tions)
	Date	Full name of contributor LAura Wauso	n	C (ID#:)	Amount of contribution (\$)
	10/16/2024	Contributor address;	City;	State; Zip Code a, Texas 77905	\$218.00
	Principal occup	ation / Job title (See Instructions) Quest of South Texas		Employer (See Instruct	tions)
	Date	Full name of contributor Joshua Garcia	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	10/15/2024	Contributor address; Victoria, Teex	City;	State; Zip Code	\$50.00
	Principal occup Sales	ation / Job title (See Instructions)		Employer (See Instruc Victoria Bill Board	tions)
	Date	Full name of contributor Melody Crabill	out-of-state PAG	C (ID#:)	Amount of contribution (\$)
	10/16/2024	Contributor address;	City;	State; Zip Code	\$20.
		ation / Job title (See Instructions)		Employer (See Instruc	tions)

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SCHEDULE A1

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The	Instruction Guide explains how to comple	te this form.	1 Total pages Schedule A1:	
2 FILER NAME	VICTORIA COUNTY REPUBLICAN PAR	3 Filer ID (Ethics Commission Filers) 00067173		
4 Date	5 Full name of contributor ut-of-si			
10/16/2024	6 Contributor address; City; Victoria,Tx 77901	State; Zip Code	\$70.	
8 Principal occu	pation / Job title (See Instructions) eer	9 Employer (See Instruc Jim Vogel Producti	tions) on	
Date	Full name of contributor out-of-s	tate PAC (ID#:)	Amount of contribution (\$)	
10/17/2024	Contributor address; City; Victoria, Tx 77901	State; Zip Code	\$24.00	
Principal occu	nation / Job title (See Instructions) Farmer	tions)		
Date 10/17/2024	Full name of contributor	tate PAC (ID#:)	Amount of contribution (\$)	
	Contributor address; City; Cuero, Texas 779054	State; Zip Code	\$99.00	
Principal occu	pation / Job title (See Instructions) Rancher	Employer (See Instruc Self Employed	tions)	
Date	Full name of contributor out-of-s	tate PAC (ID#:)	Amount of contribution (\$)	
10/17/2024	Contributor address; City; Nursery Tx 77905	State; Zip Code	\$5.00	
•	pation / Job title (See Instructions) ol Teacher	Employer (See Instruc VISD	tions)	

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SCHEDULE A1

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	The	Instruction Guide explains how to complete thi	s form.	1 Total pages Schedule A1:
2	FILER NAME	VICTORIA COUNTY REPUBLICAN PARTY (C	3 Filer ID (Ethics Commission Filers) 00067173	
4	Date 5 Full name of contributor			7 Amount of contribution (\$)
	10/18/2024	6 Contributor address; City; Austin, Texas	State; Zip Code	\$30.00
8	Principal occu Admi	pation / Job title (See Instructions) onistrator	9 Employer (See Instruc Walker and Assoc	tions)
	Date	Full name of contributor	NC (ID#:)	Amount of contribution (\$)
	10/18/2024	Contributor address; City;	State; Zip Code	\$84.00
		Victoria, Texas 77905		
	Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
	Date	Full name of contributor	AC (ID#:)	Amount of contribution (\$)
	10/18/2024	Contributor address; City; Victoria, Tx 77904	State; Zip Code	\$52.00
	Principal occup	ation / Job title (See Instructions) Retired	Employer (See Instruc	tions)
	Date 10/18/2024	Full name of contributor	CC (ID#:)	Amount of contribution (\$)
		Contributor address; City; Victoreia, Tx 77904	State; Zip Code	\$50.00
	Principal occup	ation / Job title (See Instructions) Self Employed	Employer (See Instruc	tions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how to comp	plete this form.	1 Total pages Schedule A1:
2 FILER NAME VICTO	RIA COUNTY REPUBLICAN PARTY (CEC		3 Filer ID (Ethics Commission Filers) 00067173
4 Date	5 Full name of contributor	of-state PAC (ID#:	7 Amount of contribution (\$)
10/18/2024	6 Contributor address; City Victoria, T	y; State; Zip Code	\$110.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instru	(actions)
6 Fillicipal occu	Retired	g Employer (See instit	icuons)
Date	Full name of contributor out-o	of-state PAC (ID#:	Amount of contribution (\$)
40/40/0004			
10/18/2024	Contributor address; Cit	y; State; Zip Code	\$80.00
	eation / Job title (See Instructions) Pa	Employer (See Instru SELF eMPLO	actions) YED
Data	Full name of contributor	of-state PAC (ID#:	
Date	Mike Yokum		Amount of contribution (\$)
10/18/2024	Contributor address; City	y; State; Zip Code	\$53.00
	Victoria, Tx 77901		
Principal occu	pation / Job title (See Instructions) Manager	Employer (See Instru Victoria General	actions) Baseball
Date	Full name of contributor out-o	of-state PAC (ID#:	Amount of contribution (\$)
10/18/2024		r; State; Zip Code ia, Texas 77901	\$38.00
		•	
Principal occu	oation / Job title (See Instructions) Graphic Artist	Employer (See Instru	uctions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The Instruction Guide	explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME VICTORIA COUNTY REPU	BLICAN PARTY (CEC		3 Filer ID (Ethics Commission Filers) 00067173
4 Date 5 Full name of co	ntributor	(ID#:)	7 Amount of contribution (\$)
10/18/2024 6 Contributor add	dress; City; Victoria, Tx 77901	State; Zip Code	\$110.00
8 Principal occupation / Job title (Se	e Instructions)	9 Employer (See Instruct	ions)
Retired	ŕ		
Full name of co	ntributor	: (ID#:)	Amount of contribution (\$)
Contributor add	dress; City; Victoria, Texs 77901	State; Zip Code	\$80.00
Principal occupation / Job title (See	ions)		
Full name of co	ntributor	(ID#:)	Amount of contribution (ft)
Mil	ke Yokum		Amount of contribution (\$)
10/18/2024 Contributor add	dress; City;	State; Zip Code	\$53.00
	Victoria, Tx 77901		
Principal occupation / Job title (See Manager	e Instructions)	Employer (See Instruct Victoria General Ba	ions) aseball
Full name of co	ntributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
	dress; City;	State; Zip Code	\$38.00
10/18/2024	Victoria, Texas	77901	
Principal occupation / Job title (See Graphic Artist	e Instructions)	Employer (See Instruct	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

	The	Instruction Guide explains how	form.	1 Total pages Schedule A1:	
2	FILER NAME	VICTORIA COUNTY REPUBL	LICAN PARTY (CE	EC .	3 Filer ID (Ethics Commission Filers) 00067173
4	Date	5 Full name of contributor DORETA Keith	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
	10/18/2024	6 Contributor address;	City;	State; Zip Code	\$5.00
		Victoria	a, Texas 77904		
8		pation / Job title (See Instructions) Etired		9 Employer (See Instruc	ctions)
	Date	Full name of contributor Edna Gonzales	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	10/18/2024	Contributor address;	City;	State; Zip Code	\$63.00
		Victoria, Te	xas 77901		
	Principal occup	ation / Job title (See Instructions)		Employer (See Instruc	itions)
	Date	Full name of contributor Tabitha Pruski	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	10/23/2024	Contributor address;	City;	State; Zip Code	\$35.44
		Tivoli Texas			
	Principal occup	eation / Job title (See Instructions)		Employer (See Instruc	ctions)
		Employee		Home Depot	
	Date	Full name of contributor	_	C (ID#:)	Amount of contribution (\$)
		Contributor address;	City;	State; Zip Code	
	Principal occup	nation / Job title (See Instructions)		Employer (See Instruc	otions)
		ATTA 011 A T T T	JONAL CODITO	OF THIS SCHEDULE AS N	JEEDED.

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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

	The Instruction Guide explains how to d	complete this form.		
1 Total pages Schedule F1: 1 of 11	2 FILER NAME Victoria County Republican Party	y (CEC)	3 Filer ID (Ethic	es Commission Filers)
4 Date July -Sept 2024	5 Payee name Prosperity Bank			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
\$60.00	101 South Main St Victoria, Texsa 77901			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Accounting Banking	Checking Account Fees		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder livin	g expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
7/23/24	Bill Pozzi			
Amount (\$)	Payee address;	City;	State;	Zip Code
13.53	1596 Westpark Ave Victoria, Tex	as 77905		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Printing	Party	y meeting	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder livin	g expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
7/24/24	Mint and Vne			
Amount (\$) 663.23	Payee address;	City;	State;	Zip Code
	PO Box 4784 Victoria, Texas 7	7903		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Web hosting	Hosting a	nd Maint	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder livin	g expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Travel In District
Travel Out Of District

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/W The Instruction Guide explains how to c	/ages/Contract Labor complete this form.	Other (enter a category not listed above)	
1 Total pages Schedule F1: 2 of 11	2 FILER NAME Victoria County Republican Party	(CEC)	3 Filer ID (Ethics Commission Filers) 00067173	
4 Date 7/24	5 Payee name UHV Facilities			
6 Amount (\$)	7 Payee address;	City;	State; Zip Code	
\$400	3007 Ben Wilson Victoria, Texas 7	7901		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Facility rental			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
8/19/2024	Barbara Breazeale			
Amount (\$)	Payee address;	City;	State; Zip Code	
551.41	1956 Westpatk Ave Vicotria,	Texas 77901		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	HQ supplies	general election get out the vote		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
8/19/24	Barbara Breazeale			
Amount (\$)	Payee address;	City;	State; Zip Code	
269.95	1596 WESTPARK AVENUE Victor	oria, Texas 779	901	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	HQ supplies	general ele	ction get out the vote	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED	

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.	
1 Total pages Schedule F1: 3 of 11	1: 2 FILER NAME Victoria County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00067173
4 Date 8/26/24	5 Payee name Mint and Vine		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
94.48	P O 4784 Victoria, Texas 77903		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Web hosting	Hosting	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
8/27/2024	Bill Pozzi		
Amount (\$)	Payee address;	City;	State; Zip Code
1,144.00	1596 WESTPARK AVENUE Vio	toria, Texas 77	905
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Printing	Signs	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
10/7/24	Bill Pozzi		
Amount (\$)	Payee address;	City;	State; Zip Code
\$659.23	1956 Westpark Ave Victoria, Te	exas 77905	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Printing	Signs	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.			
1 Total pages Schedule F1: 4 of 11	2 FILER NAME Victoria County Republican Part	y (CEC)	3 Filer ID (Ethic 00067173	s Commission Filers)	
4 Date 10/1/2024	5 Payee name Bill Pozzi				
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code	
\$4,388.43	1596 WESTPARK AVENUE				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF EXPENDITURE	Printing		Signs		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder living	g expense	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name				
8/27/24	Barbara Breazeale				
Amount (\$)	Payee address;	City;	State;	Zip Code	
286.83	1596 WESTPARK AVENUE Victor	oria, Texas 779	905		
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Office Gerneral election get out the vote				
	Check if travel outside of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder livinç	TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name				
9/23/24	Barbara Breazeale				
Amount (\$)	Payee address;	City;	State;	Zip Code	
148.17	1596 WESTPARK AVENUE Vict	oria, Texas 779	905		
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Office overhead	get out th	e vote		
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living	g expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	FDFD		

SCHEDULE F1

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

If the requested information is not applicable, DO NOT include this page in the report.

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

Travel In District
Travel Out Of District

Candidate/Officeholder/Politica Credit Card Payment	,	/ages/Contract Labor	Other (enter a category not listed above)
1 Total pages Schedule F1: 5 of 11	- I		3 Filer ID (Ethics Commission Filers) 00067173
4 Date 10/5/24	5 Payee name Barbara Pozzi		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
506.29	1596 WESTPARK AVENUE Victor	ria, Texas 7790	2
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Over head	get out the	he vote
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
10/13/24	Barbara Breazeale		
Amount (\$)	Payee address;	City;	State; Zip Code
147.21	1596 WESTPARK AVENUE Victo	oria, Texas 7790	05
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	overhead	Get out t	the vote
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
10/13/2024	Barbara Breazeale		
Amount (\$)	Payee address;	City;	State; Zip Code
542.04	1596 WESTPARK AVENUE Vict	oria, Texas 779	005
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Overhead	Get out the	Vote
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District

Candidate/Officeholder/Politica Credit Card Payment	, Tilling Ex	/ages/Contract Labor	Other (enter a category not listed above)	
Ground dymonic	The Instruction Guide explains how to co	omplete this form.		
1 Total pages Schedule F1: 6 of 11	2 FILER NAME Victoria County Republican Party	(CEC)	3 Filer ID (Ethics Commission Filers) 00067173	
4 Date	5 Payee name			
<u> </u>	t 1 24 Leon Building			
6 Amount (\$)	7 Payee address;	City;	State; Zip Code	
\$1800.00	115 W Juan Linn Victoria, Texas 7	7901		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Rental Expense	Overhe	ad	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
Date July	Payee name			
Aug, Sep, Oct 1 20	024 UHV Maintinace Facil;ities			
Amount (\$)	Payee address;	City;	State; Zip Code	
\$800	115 W Juan Linn Victoria, Texa	77901		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Rental	Meeting rental		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
8/16/24	UPS Store			
Amount (\$)	Payee address;	City;	State; Zip Code	
\$85.54	8806 N Navarro Victoria, Texas	s 77904		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Printing	Meeting		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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
Salaries/Wages/C

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Travel In District
Travel Out Of District

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 7 of 11	2 FILER NAME Victoria County Republican Party	y (CEC)	3 Filer ID (Ethics Commission Filers) 00067173
4 Date 9/17/2024	5 Payee name USP Store		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
53.06	1706 N Navarro St Victoria, Texas	77901	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Printing	Meeting	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
9/17/2024	UPS Store		
Amount (\$)	Payee address;	City;	State; Zip Code
2.71	1708 N Navarro Vicotria, Texas	77901	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	PRinting	Meeting	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
9/17/2024	Lamar Advertising		
Amount (\$)	Payee address;	City;	State; Zip Code
\$1500.00	4507 N Main St Victoria, Texas 77	901	
	Category (See Categories listed at the top of this schedule)	Description	ian
PURPOSE OF EXPENDITURE	Advertising	Digital s	sigri
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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

Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District

Travel Out Of District Other (enter a category not listed above)

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 00067173 Victoria County Republican Party (CEC) 4 Date 5 Payee name 8/23/24 Mint and Vine 6 Amount (\$) 7 Payee address; City; Zip Code State: 95.71 PO Box 4784 Vicotria, Tx 77903 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 **PURPOSE** Office Overhead Internet hosting OF **EXPENDITURE** (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date 9/26/2024 Rapid Printing Amount (\$) City; State: Zip Code Payee address; 400.00 1708 N Navarro Victoria, Texa 77901 Category (See Categories listed at the top of this schedule) Description **PURPOSE** Sign Advertising OF **EXPENDITURE** Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH Payee name Date 10/2/2024 Home Depot Amount (\$) Payee address; City; State: Zip Code 183.46 6708 N Zac Lenz Victoria. Texas 77904 Category (See Categories listed at the top of this schedule) Description **PURPOSE** OF **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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

Oreal Garar ayment	The Instruction Guide explains how to c	complete this form.		
1 Total pages Schedule F1: 9 of 11	2 FILER NAME Victoria County Republican Party	y (CEC)	3 Filer ID (Ethics Cor 00067173	mmission Filers)
4 Date 10/2/24	5 Payee name Rapid Printing			
6 Amount (\$)	7 Payee address;	City;	State; Z	Zip Code
880.00	1708 N Navarro Victoria, Texas 77	904		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertising	Signs		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living expe	ense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Offi	ce held
Date	Payee name			
10/4/24	Harbor Freight			
Amount (\$)	Payee address;	City;	State; 2	Zip Code
7.56	3606 N Navarro Victoira, 77	7904		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Sign material			
	Check if travel outside of Texas. Complete Schedule T.	dule T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Offic	ce held
Date	Payee name			
10/7/24	McCoys			
Amount (\$)	Payee address;	City;	State; 2	Zip Code
84.82	5803 N Navarro Victoria, Texa	as 77904		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising	sign mater	ial	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expe	ense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Off	ice held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED	

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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

Travel In District
Travel Out Of District

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	The Instruction Guide explains how to c	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME Victoria County Republican Party	y (CEC)	3 Filer ID (Ethic 00067173	s Commission Filers)
⁴ Date 10/15	5 Payee name Bozart			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
19.05	801 E Rio Grande Vicotria, Texa	as 77901		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Office Rental	Office suc	ıplies	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder livin	g expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
Amount (\$)	Payee address;	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE				
OF				
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.		in, TX, officeholder livin	-
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
Amount (\$)	Payee address;	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	FDFD	

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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

Printing Expense Travel Out of Dis Salaries/Wages/Contract Labor Other (enter a cal

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 00067173 Victoria County Republican Party (CEC) 11 of 11 4 Date 5 Payee name 10/21/2024 **UPS Store** 6 Amount (\$) 7 Payee address; City; Zip Code State: \$43.32 1708 N. Navarro Victoria, Texas 77901 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 **PURPOSE** Advertising Signs OF **EXPENDITURE** (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date State: Zip Code City; Amount (\$) Payee address; Description Category (See Categories listed at the top of this schedule) **PURPOSE** OF **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH Payee name Date Amount (\$) Payee address; City; State: Zip Code Category (See Categories listed at the top of this schedule) Description **PURPOSE** OF **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED