

# CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

<b>1</b> Filer ID (Ethics Commission Filers) 00055130	<b>2</b> Total pages filed: 39	<b>OFFICE USE ONLY</b>	
<b>3</b> COMMITTEE NAME Nueces County Republican Executive Committee (CEC)	Date Received ELECTRONICALLY FILED 11/06/2024		
<b>4</b> TREASURER NAME Holmgreen Jr., John C. (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 09/24/2024	THROUGH	Month Day Year 10/26/2024
Date Imaged			

**7 EXPLANATION OF CORRECTION**

Contributions had an incorrect address, and the amount of \$25 should have been \$300 for Robert Eisenberg. Entries were deleted, and a new file was uploaded due to the first name being in the last name field.

The expenses entry for \$1,735 was incorrectly entered for Grunwald Printing Co., so it was deleted. The entry for Calde, Charlie's \$5, was deleted it did not exceed the threshold.

**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. John C. Holmgreen Jr.  
\_\_\_\_\_  
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 REPORT: PURPOSE & TOTALS

FORM CEC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Nueces County Republican Executive Committee (CEC)	<b>13 Filer ID</b> (Ethics Commission Filers) 00055130
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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 Michael Hunter Mayor Corpus Christi
		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>	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$ 19,970.16
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 41,410.30
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 39,407.02
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. John C. Holmgreen Jr.  
\_\_\_\_\_  
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

# COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE

**FORM CEC  
ADDENDUM**

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<b>12 COMMITTEE NAME</b> Nueces County Republican Executive Committee (CEC)		<b>13 Filer ID</b> (Ethics Commission Filers) 00055130
<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 Carolyn Vaughn City Council At-Large Corpus Christi
		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>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 Larry Elizondo City Council At-Large Corpus Christi
		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>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 Jahvid Motahgi City Council At-Large Corpus Christi
		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.)	

# COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE

**FORM CEC  
ADDENDUM**

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<b>12 COMMITTEE NAME</b> Nueces County Republican Executive Committee (CEC)		<b>13 Filer ID</b> (Ethics Commission Filers) 00055130
<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 Kaylynn Paxson City Council District 4 Corpus Christi  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>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  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.)	Gil Hernandez City Council District 5 Corpus Christi
<b>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 Samuel Aundra Fryer School Board At-Large Corpus Christi ISD  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.)	

# COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE

**FORM CEC  
ADDENDUM**

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<b>12 COMMITTEE NAME</b> Nueces County Republican Executive Committee (CEC)		<b>13 Filer ID</b> (Ethics Commission Filers) 00055130
<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 Mike Bergsma School Board At-Large Corpus Christi ISD  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>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  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.)	Jerry Hooper School Board Place 1 Flour Bluff ISD
<b>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  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.)	Jennifer Welp School Board Place 6 Flour Bluff ISD

# COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE

**FORM CEC  
ADDENDUM**

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<b>12 COMMITTEE NAME</b> Nueces County Republican Executive Committee (CEC)		<b>13 Filer ID</b> (Ethics Commission Filers) 00055130
<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 Brian Boone School Board Place 1 Tuloso-Midway ISD  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>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>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  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>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed Ballot ID:Prop A Election Date:2024-11-05 Desc:Proposition A (Streets) The issuance of bonds for designing, demolishing, constructing, renovating
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE

**FORM CEC  
ADDENDUM**

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<b>12 COMMITTEE NAME</b> Nueces County Republican Executive Committee (CEC)		<b>13 Filer ID</b> (Ethics Commission Filers) 00055130
<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  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed Ballot ID:Prop B Election Date:2024-11-05 Desc:Proposition B (Parks and Recreation) The issuance of bonds for designing, demo, constructing,
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed Ballot ID:Prop C Election Date:2024-11-05 Desc:Proposition C (Public Safety) The issuance of bonds for designing, demolishing,
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>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  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed Ballot ID:Prop D Election Date: Desc:Proposition D (Cultural Facilities) Repurposing the expiring Type A sales and use tax of 1/8 of 1%
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	



# COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE

**FORM CEC  
ADDENDUM**

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<b>12 COMMITTEE NAME</b> Nueces County Republican Executive Committee (CEC)	<b>13 Filer ID</b> (Ethics Commission Filers) 00055130
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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	
		B. Opposed	
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed Ballot ID:Prop E Election Date:2024-11-05 Desc:Proposition E (Streets - Arterial &Collector; & Recreational &Community Facilities) Repurposing	
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)		

<b>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	
		B. Opposed	
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported Ballot ID:Prop F Election Date:2024-11-05 Desc:PropositionF (City-Wide Flood Control, Drainage &Coastal Resiliency)Repurposing the expiring TypeA	
		B. Opposed	
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)		

**SUBTOTALS - CEC****FORM CEC**  
**COVER SHEET PG 3**  
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<b>17 COMMITTEE NAME</b> Nueces County Republican Executive Committee (CEC)		<b>18 Filer ID</b> (Ethics Commission Filers) 00055130
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 19,970.16
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	\$ 41,410.30
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	\$ 972.68

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 1/18 Rpt: 11/39
2 FILER NAME Nueces County Republican Executive Committee (CEC)		3 Filer ID (Ethics Commission Filers) 00055130
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Patricia Gail	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adamson, Connor	Amount of Contribution (\$) \$26.34
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78414	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Gault Nye Quintana
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adamson, Sisi	Amount of Contribution (\$) \$104.42
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aquino, Anthony	Amount of Contribution (\$) \$20.24
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) Calallen Baptist
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADFORD, REBECCA	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78414	
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>		1 Total pages Schedule A1: Sch: 2/18 Rpt: 12/39
2 FILER NAME Nueces County Republican Executive Committee (CEC)		3 Filer ID (Ethics Commission Filers) 00055130
4 Date 10/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ballenger, Kimberly	7 Amount of Contribution (\$)  \$10.72
	6 Contributor address; City; State; Zip Code  Corpus Christi, TX 78414	
8 Principal occupation / Job title (See Instructions) Small Business Owner		9 Employer (See Instructions)
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bergsma, Michael	Amount of Contribution (\$)  \$1,000.00
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	
Principal occupation / Job title (See Instructions) Geologist		Employer (See Instructions) Self Employed
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Calderone, Carmen	Amount of Contribution (\$)  \$21.13
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78414	
Principal occupation / Job title (See Instructions) Analyzer Technician		Employer (See Instructions) Flint Hills Resources
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carroll, Tracey	Amount of Contribution (\$)  \$3,000.00
	Contributor address; City; State; Zip Code  Port Aransas, TX 78373	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chapa, Debbie	Amount of Contribution (\$)  \$50.00
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78402	
Principal occupation / Job title (See Instructions) Veteran		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 3/18 Rpt: 13/39
2 FILER NAME Nueces County Republican Executive Committee (CEC)		3 Filer ID (Ethics Commission Filers) 00055130
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chesney, Brent	7 Amount of Contribution (\$) \$520.87
	6 Contributor address; City; State; Zip Code  Corpus Christi, TX 78412	
8 Principal occupation / Job title (See Instructions) CEO General Counsel		9 Employer (See Instructions) First Title Company
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeVos, Krystal	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) American Electric Power
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeVos, Krystal	Amount of Contribution (\$) \$20.24
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) AEP
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DuArte, Andrew	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78405	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Olympia Construction
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eisenberg, Robert	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76104	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/18 Rpt: 14/39
<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elect Carolyn Vaughn Campaign <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78426	<b>7</b> Amount of Contribution (\$)  \$700.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elizondo, Larry <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	Amount of Contribution (\$)  \$729.10
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flanagan, Shawn <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flanagan, Shawn <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) coach		Employer (See Instructions) retired
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flanagan, Shawn <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 5/18 Rpt: 15/39
2 FILER NAME Nueces County Republican Executive Committee (CEC)		3 Filer ID (Ethics Commission Filers) 00055130
4 Date 10/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flanagan, Shawn	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fryer, Samuel	Amount of Contribution (\$) \$26.34
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78468	
Principal occupation / Job title (See Instructions) Training Information Administrator		Employer (See Instructions) Corpus Christi Army Depot
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fryer, Samuel	Amount of Contribution (\$) \$312.65
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78468	
Principal occupation / Job title (See Instructions) Candidate Training Information Administrator		Employer (See Instructions) Department of the Army
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Galvan, Ray	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78415	
Principal occupation / Job title (See Instructions) Appliance Repair		Employer (See Instructions) Self Employed
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garner, Barbara	Amount of Contribution (\$) \$26.34
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	
Principal occupation / Job title (See Instructions) End of Life Diula		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 6/18 Rpt: 16/39
2 FILER NAME Nueces County Republican Executive Committee (CEC)		3 Filer ID (Ethics Commission Filers) 00055130
4 Date 10/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garner, Barbara	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	
8 Principal occupation / Job title (See Instructions) End of Life Diula		9 Employer (See Instructions) Self Employed
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gassman, Edward	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78418	
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Fast Eddies Dekivery
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gilbert Hernandez Campaign Account	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gonzalez, Ana Maria	Amount of Contribution (\$) \$26.34
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78466	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) RETIRED
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Graves, Nancy	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	
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: 7/18 Rpt: 17/39
<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Graves, Nancy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	<b>7</b> Amount of Contribution (\$)  \$62.78
<b>8</b> Principal occupation / Job title (See Instructions) unemployed		<b>9</b> Employer (See Instructions) unemployed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Graves, Nancy <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Graves, Nancy <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Graves, Nancy <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Graves, Nancy <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/18 Rpt: 18/39
<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guggenheim, Alan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78418	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired CEO		<b>9</b> Employer (See Instructions)
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guggenheim, Suzanne <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78418	Amount of Contribution (\$)  \$26.34
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haas, Marcus <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$104.42
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) Gulf Coastal Breeze Inc
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holland, Glenn <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78414	Amount of Contribution (\$)  \$26.34
Principal occupation / Job title (See Instructions) Lead Pastor		Employer (See Instructions) The Net Fellowship Church
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holmgreen, John <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78412	Amount of Contribution (\$)  \$104.42
Principal occupation / Job title (See Instructions) lawyer		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: 9/18 Rpt: 19/39
<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holmgreen, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78412	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
<b>Date</b> 10/06/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hovda, Deborah <hr/> <b>Contributor address; City; State; Zip Code</b>  Corpus Christi, TX 78409	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 10/10/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hunter, Michael <hr/> <b>Contributor address; City; State; Zip Code</b>  Corpus Christi, TX 78412	<b>Amount of Contribution (\$)</b>  \$52.37
<b>Principal occupation / Job title (See Instructions)</b> Consultant		<b>Employer (See Instructions)</b> EH Consulting
<b>Date</b> 10/21/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) James D Grandberry Campaign <hr/> <b>Contributor address; City; State; Zip Code</b>  Corpus Christi, TX 78401	<b>Amount of Contribution (\$)</b>  \$1,000.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/13/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kerns-Collier, Mary <hr/> <b>Contributor address; City; State; Zip Code</b>  Corpus Christi, TX 78411	<b>Amount of Contribution (\$)</b>  \$26.34
<b>Principal occupation / Job title (See Instructions)</b> Disabled		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/18 Rpt: 20/39
<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lamb, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78401	<b>7</b> Amount of Contribution (\$)  \$20.24
<b>8</b> Principal occupation / Job title (See Instructions) Land Management and PCT 16		<b>9</b> Employer (See Instructions) Self
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lamb, Susan <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78401	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Land Management		Employer (See Instructions) Self
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lamb, Susan <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78401	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Land Management		Employer (See Instructions) Self
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lamb, Susan <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78401	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Land Management		Employer (See Instructions) Self
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lamb, Susan <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78401	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Land Management		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/18 Rpt: 21/39
<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lamb, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78401	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Land Management		<b>9</b> Employer (See Instructions) Self
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Locke, Heather <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78401	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Magill, Chad <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78414	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Director of Business Development		Employer (See Instructions) Buchanan Title
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mahaffey, Rodney <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78412	Amount of Contribution (\$)  \$100.00
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#: _____ ) McKee, Estella <hr/> Contributor address; City; State; Zip Code  Raymondville, TX 78580	Amount of Contribution (\$)  \$210.00
Principal occupation / Job title (See Instructions) Self employed		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: 12/18 Rpt: 22/39
<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Milby, Laura <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Milby, Richard <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) Retired
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Motaghi, Jahvid <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78415	Amount of Contribution (\$)  \$26.34
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self Employed
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nuss, Patricia <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olsson, Natalie <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	Amount of Contribution (\$)  \$21.38
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/18 Rpt: 23/39
<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olsson, Natalie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	<b>7</b> Amount of Contribution (\$)  \$2,082.56
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
<b>Date</b> 10/17/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olsson, Natalie <hr/> <b>Contributor address; City; State; Zip Code</b>  Corpus Christi, TX 78413	<b>Amount of Contribution (\$)</b>  \$5.52
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 10/21/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, Robert <hr/> <b>Contributor address; City; State; Zip Code</b>  Corpus Christi, TX 78469	<b>Amount of Contribution (\$)</b>  \$3,000.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 10/16/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phalen, Martin <hr/> <b>Contributor address; City; State; Zip Code</b>  Port Aransas, TX 78373	<b>Amount of Contribution (\$)</b>  \$104.42
<b>Principal occupation / Job title (See Instructions)</b> Radiation Safety Health Physicist		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 09/27/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Quintanilla, Michel <hr/> <b>Contributor address; City; State; Zip Code</b>  Corpus Christi, TX 78415	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b> Manager		<b>Employer (See Instructions)</b> Navy Exchange

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/18 Rpt: 24/39
<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 09/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramos-Figueroa, Roberto	<b>7</b> Amount of Contribution (\$)  \$52.37
<b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78414		
<b>8</b> Principal occupation / Job title (See Instructions) Aircraft Examiner		<b>9</b> Employer (See Instructions) Department of the ARMY
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramos-Figueroa, Roberto	Amount of Contribution (\$)  \$52.37
Contributor address; City; State; Zip Code  Corpus Christi, TX 78414		
Principal occupation / Job title (See Instructions) Aircraft Examiner		Employer (See Instructions) Department of the ARMY
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rickertsen, William	Amount of Contribution (\$)  \$520.87
Contributor address; City; State; Zip Code  Corpus Christi, TX 78418		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robert, Marianne	Amount of Contribution (\$)  \$5.52
Contributor address; City; State; Zip Code  Corpus Christi, TX 78414		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ross, Shannon	Amount of Contribution (\$)  \$31.55
Contributor address; City; State; Zip Code  Corpus Christi, TX 78411		
Principal occupation / Job title (See Instructions) Retired teacher		Employer (See Instructions) Annapolis Christian Academy



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 15/18 Rpt: 25/39
2 FILER NAME Nueces County Republican Executive Committee (CEC)		3 Filer ID (Ethics Commission Filers) 00055130
4 Date 10/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roy, Everett	7 Amount of Contribution (\$)  \$26.34
	6 Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	
8 Principal occupation / Job title (See Instructions) Market President		9 Employer (See Instructions) National Bank Trust
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sales, James	Amount of Contribution (\$)  \$21.13
	Contributor address; City; State; Zip Code  corpus Christi, TX 78414	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) 36th District Attorney's Office
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schwing, Larry	Amount of Contribution (\$)  \$26.34
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	
Principal occupation / Job title (See Instructions) Medicare Sales		Employer (See Instructions) Self
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sexton, Teri	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78412	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sheriff J C Hooper	Amount of Contribution (\$)  \$1,000.00
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/18 Rpt: 26/39
<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sims, Orlando <hr/> <b>6</b> Contributor address; City; State; Zip Code  CORPUS CHRISTI, TX 78414	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Self Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stokes, Sandra and Dee <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	Amount of Contribution (\$)  \$25.00
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#: _____ ) Suarez, Jesse <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78415	Amount of Contribution (\$)  \$47.16
Principal occupation / Job title (See Instructions) Electrician		Employer (See Instructions) Rabalais I & E Constructors
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Bryan <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78412	Amount of Contribution (\$)  \$104.42
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Bryan <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78412	Amount of Contribution (\$)  \$104.42
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/18 Rpt: 27/39
<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weir, Ken <hr/> <b>6</b> Contributor address; City; State; Zip Code  CORPUS CHRISTI, TX 78411	<b>7</b> Amount of Contribution (\$)  \$104.42
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whiteside, Jason <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$52.37
Principal occupation / Job title (See Instructions) Estimator		Employer (See Instructions) Pro Tech Mechanical
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woods, Pamela <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$26.34
Principal occupation / Job title (See Instructions) Contractor Designer		Employer (See Instructions) Self Employed
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woods, Pamela <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Office manager		Employer (See Instructions) Bergstrom
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woods, Pamela <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$26.34
Principal occupation / Job title (See Instructions) Contractor Designer		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: 18/18 Rpt: 28/39
<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) bennett, edward <hr/> <b>6</b> Contributor address; City; State; Zip Code  CORPUS CHRISTI, TX 78414	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) CPA		<b>9</b> Employer (See Instructions) Ed Bennett

# 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: 1/10 Rpt: 29/39	<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)	<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/02/2024	<b>5</b> Payee name Adobe Inc.	
<b>6</b> Amount (\$) \$45.44	<b>7</b> Payee address; City; State; Zip Code 345 Park Avenue  San Jose, CA 95110	
<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 Software license
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/21/2024	Payee name Adobe Inc.	
Amount (\$) \$21.64	Payee address; City; State; Zip Code 345 Park Avenue  San Jose, CA 95110	
<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 Software license
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/09/2024	Payee name Amazon.com, Inc	
Amount (\$) \$87.67	Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109	
<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 Yard sign H stakes
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: 2/10 Rpt: 30/39	<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)	<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 09/27/2024	<b>5</b> Payee name Butler Signature	
<b>6</b> Amount (\$) \$3,727.91	<b>7</b> Payee address; City; State; Zip Code 5826 Wooldridge Rd  Corpus Christi, TX 78414	
<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 9/28 Get out the vote Rally
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/24/2024	Payee name Donorbox	
Amount (\$) \$451.88	Payee address; City; State; Zip Code 1520 Belle View Blvd #4106 Alexandria, VA 22307	
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 Processing Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name Gaglers	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 2093 Philadelphia Pike #7468 Claymont, DE 19703	
PURPOSE OF EXPENDITURE	<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 Phone Banking Software for Political Calling for candidate use
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: 3/10 Rpt: 31/39	<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)	<b>3</b> Filer ID (Ethics Commission Filers) 00055130
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<b>4</b> Date 10/21/2024	<b>5</b> Payee name Gaglers
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<b>6</b> Amount (\$) \$250.00	<b>7</b> Payee address; City; State; Zip Code 2093 Philadelphia Pike #7468 Claymont, DE 19703
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<b>8</b> PURPOSE OF EXPENDITURE	<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 Phone Banking Software for Political Calling for candidates to use
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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 10/21/2024	Payee name Gaglers
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Amount (\$) \$250.00	Payee address; City; State; Zip Code 2093 Philadelphia Pike #7468 Claymont, DE 19703
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<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 Phone Banking Software for Political Calling for candidates to use
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/30/2024	Payee name Grunwald Printing Co.
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Amount (\$) \$5,131.76	Payee address; City; State; Zip Code PO Box 3219  Corpus Christi, TX 78404
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<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 yard signs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 4/10 Rpt: 32/39	<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)	<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b>	Date 10/15/2024	<b>5</b> Payee name Grunwald Printing Co.	
<b>6</b>	Amount (\$) \$3,984.60	<b>7</b> Payee address; City; State; Zip Code PO Box 3219  Corpus Christi, TX 78404	
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Printing Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Republican Absentee Mailer
<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 Grunwald Printing Co.	
	Amount (\$) \$2,246.20	Payee address; City; State; Zip Code PO Box 3219  Corpus Christi, TX 78404	
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
	Date 10/22/2024	Payee name Grunwald Printing Co.	
	Amount (\$) \$15,492.46	Payee address; City; State; Zip Code PO Box 3219  Corpus Christi, TX 78404	
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Printing Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense NCRP Mailer
	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: 5/10 Rpt: 33/39	<b>2</b>	FILER NAME Nueces County Republican Executive Committee (CEC)	<b>3</b>	Filer ID (Ethics Commission Filers) 00055130
<b>4</b>	Date 10/22/2024	<b>5</b>	Payee name Grunwald Printing Co.		
<b>6</b>	Amount (\$) \$1,190.34	<b>7</b>	Payee address; City; State; Zip Code PO Box 3219  Corpus Christi, TX 78404		
<b>8</b>	<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		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/08/2024		Payee name Hammond, William		
	Amount (\$) \$1,000.00		Payee address; City; State; Zip Code CRM software 7901 Williams Dr Apt 6902 Corpus Christi, TX 78412		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<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 Contract Labor to help at the office and run errands		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/15/2024		Payee name IRS		
	Amount (\$) \$201.17		Payee address; City; State; Zip Code USA TAXPMT Online P.O. Box 1214 Charlotte, NC 28201-1214		
	<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 Federal Taxes (941/943/944)		
		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: 6/10 Rpt: 34/39	<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)	<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/21/2024	<b>5</b> Payee name Intuit QuickBooks	
<b>6</b> Amount (\$) \$69.29	<b>7</b> Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<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 QB online payment fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/21/2024	Payee name Intuit QuickBooks	
Amount (\$) \$128.99	Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<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 QB payment fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name Lowe's	
Amount (\$) \$54.71	Payee address; City; State; Zip Code 1530 Airline Dr  Corpus Christi, TX 78412	
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 Supplies for Event Rally Saturday 9/30
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: 7/10 Rpt: 35/39	<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)	<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 09/30/2024	<b>5</b> Payee name Lowe's	
<b>6</b> Amount (\$) \$80.62	<b>7</b> Payee address; City; State; Zip Code 1530 Airline Dr  Corpus Christi, TX 78412	
<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 Supplies for Event Rally Saturday 9/30
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2024	Payee name MICROSOFT INC	
Amount (\$) \$19.19	Payee address; City; State; Zip Code 1 MICROSOFT WAY  REDMOND, WA 98052	
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 Software licenses
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2024	Payee name MICROSOFT INC	
Amount (\$) \$27.06	Payee address; City; State; Zip Code 1 MICROSOFT WAY  REDMOND, WA 98052	
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 Software Licenses
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: 8/10 Rpt: 36/39	<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)	<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/08/2024	<b>5</b> Payee name NationBuilder	
<b>6</b> Amount (\$) \$359.00	<b>7</b> Payee address; City; State; Zip Code PO Box 811428  Los Angeles, CA 90081	
<b>8</b> PURPOSE OF EXPENDITURE	<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 CRM software
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/03/2024	Payee name OOMA INC	
Amount (\$) \$30.93	Payee address; City; State; Zip Code 1880 EMBARCADERO ROAD  PALO ALTO, CA 94303	
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 telephone service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/09/2024	Payee name Olguin, Hilda	
Amount (\$) \$1,279.63	Payee address; City; State; Zip Code 14206 Bowman Ct  Robstown, TX 78380	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<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 September Monthly pay
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: 9/10 Rpt: 37/39	<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)	<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/02/2024	<b>5</b> Payee name Reich Enterprises, Inc.	
<b>6</b> Amount (\$) \$4,350.00	<b>7</b> Payee address; City; State; Zip Code P O Box 81281  Corpus Christi, TX 78468	
<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 September & October Lease
<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 Spectrum	
Amount (\$) \$133.15	Payee address; City; State; Zip Code 4001 Saratoga Blvd  Corpus Christi, TX 78413	
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 Internet Services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2024	Payee name Stich, Ron	
Amount (\$) \$52.60	Payee address; City; State; Zip Code 3025 Quail Springs Rd Apt C8  Corpus Christi, TX 78414	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage 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 Coffee & donuts for Coffee Conservative Conversation every other Friday
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: 10/10 Rpt: 38/39	<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)	<b>3</b> Filer ID (Ethics Commission Filers) 00055130
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<b>4</b> Date 10/02/2024	<b>5</b> Payee name Texas Workforce Commission
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<b>6</b> Amount (\$) \$42.00	<b>7</b> Payee address; City; State; Zip Code PO Box 8870  Corpus Christi, TX 78468
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<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 Federal Unemployment
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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 Texas Workforce Commission
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Amount (\$) \$202.06	Payee address; City; State; Zip Code PO Box 8870  Corpus Christi, TX 78468
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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 Federal Taxes (941/943/944) End of tax period: 10/31/2024
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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: 39/39
<b>2</b> FILER NAME Nueces County Republican Executive Committee (CEC)		<b>3</b> Filer ID (Ethics Commission Filers) 00055130
<b>4</b> Date 10/01/2024	<b>5</b> Name of person from whom amount is received Butler Signature Events LLC	<b>8</b> Amount (\$) \$150.00
	<b>6</b> Address of person from whom amount is received; City; State; Zip Code  Corpus Christi, TX 78414	
	<b>7</b> Purpose for which amount is received Deposit Returned <input type="checkbox"/> Check if political contribution returned to filer	
<b>Date</b> 09/24/2024	<b>Name of person from whom amount is received</b> Packeze	<b>Amount (\$)</b> \$822.68
	<b>Address of person from whom amount is received; City; State; Zip Code</b>  Houston, TX 77073	
	<b>Purpose for which amount is received</b> Returned Signs <input type="checkbox"/> Check if political contribution returned to filer	