FORM CEC COUNTY EXECUTIVE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The CEC Instruction Guide explains how to complete this form. 00086977 3 COMMITTEE NAME **OFFICE USE ONLY** Jefferson County Republican Party Date Received **ELECTRONICALLY FILED** 01/04/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 148 South Dowlen Rd. Date Hand-delivered or Date Postmarked #627 Change of Address Beaumont, TX 77707 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Patricia NAME NICKNAME LAST **SUFFIX** Greene STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 4400 Morning Star Pl. STREET **ADDRESS** (Residence or Business) Beaumont, TX 77705 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 4400 Morning Star Pl. MAILING **ADDRESS** Beaumont, TX 77705 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (409) 626-2585 PHONE REPORT January 15 30th day before election Final Report **TYPE** 10th day after campaign treasurer 8th day before election July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 10/27/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Jefferson County Repu	blican Party		00086977	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Republican		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOAN CONTRIBUTIONS	ED POLITICAL CONTRIBUTIONS (OTHER THAN S, OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) ort qualifies for the higher itemization threshold	\$	0.00
		CAL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,481.15
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITIO	CAL EXPENDITURES	\$	21,452.88
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT	L CONTRIBUTIONS MAINTAINED AS OF THE LAST ING PERIOD	DAY \$	171,913.61
OUTSTANDING LOAN TOTALS	1	L AMOUNT OF ALL OUTSTANDING LOANS AS OF T E REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	•		I	
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.		
		Ms. Patrio	cia Greene	
		Signature of Car	mpaign Treasu	rer
AFFIX NOTARY	STAMP / SEAL ABOV	E		
Sworn to and subscribed	before me, by the said	, th	nis the	day
of	_, 20, to certif	fy which, witness my hand and seal of office.		
Signature of officer ad	lministering oath	Printed name of officer administering oath	Title of offic	er administering oath

SUBTOTALS - CEC

FORM CEC **COVER SHEET PG 3**

					3 of 33
17 CC	MMITTE	E NAME	18 Filer ID	(Eth	ics Commission Filers)
Je	fferson	County Republican Party	00086977		
19 SC	HEDULI		SUBTOTAL AMOUNT		
NA	ME OF		SUBTOTAL AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,443.19
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	37.96
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	21,452.88
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
10.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/12 Rpt: 4/33	
2	FILER NAME Jefferson Co	unty Republican Party		3	Filer ID (Ethics Commission 00086977	Filers)
4	Date 10/29/2024	 Full name of contributor out-of-state PAC (ID#:_Adams, Robert (Mr.) Contributor address; City; State; Zip Code 	_	7	Amount of Contribution (\$)	\$45.00
_		Groves, TX 77619				
8	Principal occu Constable	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_Armstrong, Joey Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		Nederland, TX 77627				
	Principal occu Sales	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_Bowling, Mary Beth (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
		Beaumont, TX 77706				
	Principal occu Registered N	pation / Job title (See Instructions) lurse	Employer (See Instructions	s)		
	Date 11/08/2024	Full name of contributor out-of-state PAC (ID#:_Brown, Janet (Ms.) Contributor address; City; State; Zip Code Pt. Neches, TX 77651			Amount of Contribution (\$)	\$35.00
	Principal occu Case Worke	pation / Job title (See Instructions)	Employer (See Instructions	<u>. </u>		
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#:_Carr , DINA (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77705			Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIE	BUTION	S		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to complet	e this for	n.	1	Total pages Schedule A1: Sch: 2/12 Rpt: 5/33	
2	FILER NAME Jefferson Co	unty Republican Party			3	Filer ID (Ethics Commission 00086977	Filers)
4	Date 10/29/2024	 Full name of contributor out-of-state in Chipman, Howard Contributor address; City; State; Zip Code 	-		7	Amount of Contribution (\$)	\$40.00
		Groves, TX 77619					
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 10/29/2024	Chipman, Howard	PAC (ID#:)		Amount of Contribution (\$)	\$10.00
		Groves, TX 77619					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 11/25/2024	Full name of contributor out-of-state Full name of contributor (Ms.) Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$75.00
		Beaumont, TX 77706					
	Principal occu Housewife	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 11/12/2024	Evans, Joe (Mr.)	PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/10/2024	Full name of contributor out-of-state Fevans, Joe (Mr.) Contributor address; City; State; Zip Code Beaumont, TX 77707)		Amount of Contribution (\$)	\$25.00
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 3/12 Rpt: 6/33	
2	FILER NAME Jefferson Co	unty Republican Party		3	Filer ID (Ethics Commission 00086977	n Filers)
4	Date 11/19/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_		Beaumont, TX 77706	1			
8	Principal occu Homemaker	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID# Friesz, Gordon (Judge) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Dringing agg	Nederland, TX 77627	Employer (Con Instructions	_		
	317 District of	pation / Job title (See Instructions) of Texas	Employer (See Instructions)		
	Date 12/24/2024	Full name of contributor out-of-state PAC (ID# Friesz, Gordon (Judge) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Nederland, TX 77627				
	Principal occu 317 District o	pation / Job title (See Instructions) f Texas	Employer (See Instructions	5)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID# Gabrysch, Donna (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77707)		Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions none	5)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID# Gabrysch, Donna (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77707	:)		Amount of Contribution (\$)	\$16.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions none	()		
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	MONET	ARY POLITICAL CONTRIBU	JTIONS		SCHEDULI	E A1
	The Instruc	etion Guide explains how to complete t	this form.	1	Total pages Schedule A1: Sch: 4/12 Rpt: 7/33	
2	FILER NAME Jefferson Co	unty Republican Party		3	Filer ID (Ethics Commission 00086977	n Filers)
4	Date 10/29/2024	 Full name of contributor out-of-state PAC Glaze, Cindy Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$10.00
_	Dringing age	Orangefield, TX 77639	6 Employer (Co.) Instructional			
8	Accounting (pation / Job title (See Instructions) Clerk	9 Employer (See Instructions	is)		
	Date 11/08/2024	Full name of contributor out-of-state PAC Greene, Pat Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$70.00
		Beaumont, TX 77705	1			
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	is)		
	Date 11/25/2024	Full name of contributor out-of-state PAC Greene, Pat Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$25.00
		Beaumont, TX 77705				
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 11/18/2024	Full name of contributor out-of-state PACHAII, Ann (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	C (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 12/18/2024	Full name of contributor out-of-state PACHAII, Ann (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	C (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
			1			

	MONET	ARY POLITICAL CONTRI	BUTION	IS		SCHEDUL	E A1
	The Instruc	tion Guide explains how to comple	ete this for	m.	1	Total pages Schedule A1: Sch: 5/12 Rpt: 8/33	
2	FILER NAME Jefferson Co	unty Republican Party			3	Filer ID (Ethics Commission 00086977	n Filers)
4	Date 11/12/2024	Henderson, Elaine (Ms.)	PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
_		Beaumont, TX 77706	I-				
8	Principal occup Retired	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 10/29/2024	Hendon, Jimmy				Amount of Contribution (\$)	\$10.00
		Beaumont, TX 77726					
	Principal occuj Realtor	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Date 11/08/2024	Full name of contributor out-of-state Howard, Delores (Ms.) Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$36.00
		Mauricevulle, TX 77626					
	Principal occup	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date 10/29/2024	Johnson, Rachel				Amount of Contribution (\$)	\$26.00
	Principal occup Amination Cl	oation / Job title (See Instructions) erk		Employer (See Instructions	5)		
	Date 10/29/2024	Justice, Teresa)		Amount of Contribution (\$)	\$28.00
	Principal occu Homemaker	oation / Job title (See Instructions)		Employer (See Instructions	5)		
			'				

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to complete this t	orm.	1	Total pages Schedule A1: Sch: 6/12 Rpt: 9/33	
2	FILER NAME Jefferson Co	unty Republican Party		3	Filer ID (Ethics Commission 00086977	Filers)
4	Date 10/29/2024	 Full name of contributor out-of-state PAC (ID#: Kneuper, Flix Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$18.00
		Groves, TX 77619				
8	Principal occu Minister	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ Leach, Richard Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$26.00
	Dringing! goog	Evadale, TX 77615	Employer (See Instructions	_		
	Operator	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_Madry, Bruce (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Groves, TX 77619				
	Principal occu Industrial Wo	pation / Job title (See Instructions) orker	Employer (See Instructions	i)		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:_Madry, Bruce (Mr.) Contributor address; City; State; Zip Code Groves, TX 77619			Amount of Contribution (\$)	\$50.00
	Principal occu Industrial Wo	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_Many, Jr., Scott Contributor address; City; State; Zip Code Beaumont, TX 77706			Amount of Contribution (\$)	\$20.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions	()		
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	MONET	ARY POLITICAL CONTRIBU	TIONS	SC	CHEDULE A1
	The Instruc	ction Guide explains how to complete t	his form.	1 Total pages Scher Sch: 7/12 Rpt: 1	
2	FILER NAME Jefferson Co	unty Republican Party		3 Filer ID (Ethics 0 00086977	Commission Filers)
4	Date 10/29/2024	 Full name of contributor out-of-state PAC Mayes, Pat (Ms.) Contributor address; City; State; Zip Code 	(ID#:)	7 Amount of Contrib	sution (\$) \$10.00
_		Beaumont, TX 77706			
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instruction	ns)	
	Date 11/08/2024	Full name of contributor out-of-state PAC Mayes, Pat (Ms.) Contributor address; City; State; Zip Code	(ID#:)	Amount of Contrib	station (\$) \$35.00
		Beaumont, TX 77706			
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instruction	ns)	
	Date 11/02/2024	Full name of contributor out-of-state PAC Miller, Danny (Mr.) Contributor address; City; State; Zip Code	(ID#:)	Amount of Contrib	sution (\$) \$25.00
		Pt. Neches, TX 77651			
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instruction	ns)	
	Date 12/02/2024	Full name of contributor out-of-state PAC Miller, Danny (Mr.) Contributor address; City; State; Zip Code Pt. Neches, TX 77651	(ID#:)	Amount of Contrib	sution (\$) \$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instruction	ns)	
	Date 10/29/2024	Full name of contributor out-of-state PAC Moff, Don Contributor address; City; State; Zip Code Beaumont, TX 77706	(ID#:)	Amount of Contrib	s20.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instruction	ns)	
			'		

	MONET	ARY POLITICAL CONTRIBU	JTIONS		SCHEDULI	■ A1
	The Instruc	ction Guide explains how to complete t	this form.	1	otal pages Schedule A1: Sch: 8/12 Rpt: 11/33	
2	FILER NAME Jefferson Co	unty Republican Party			iler ID (Ethics Commission 0086977	ı Filers)
4	Date 11/18/2024	 Full name of contributor out-of-state PAC Munro, Mary (Ms.) Contributor address; City; State; Zip Code 	C (ID#:)	7 A	mount of Contribution (\$)	\$50.00
_		Beaumont , TX 77707				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 12/17/2024	Full name of contributor out-of-state PAC Munro, Mary (Ms.) Contributor address; City; State; Zip Code	C (ID#:)	A	mount of Contribution (\$)	\$50.00
	Delicalization	Beaumont , TX 77707	Fordows (October to the chief			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 11/25/2024	Full name of contributor out-of-state PAC Pacetti, Rodney (Mr.) Contributor address; City; State; Zip Code	C (ID#:)		mount of Contribution (\$)	\$25.00
		Groves, TX 77619				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/01/2024	Full name of contributor out-of-state PAC Patton, James (Mr.) Contributor address; City; State; Zip Code Beaumont, TX 77703	C (ID#:)	A	mount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/25/2024	Full name of contributor out-of-state PAC Patton, James (Mr.) Contributor address; City; State; Zip Code Beaumont, TX 77703	C (ID#:)	A	mount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 9/12 Rpt: 12/33	
2	FILER NAME Jefferson Co	unty Republican Party		3	Filer ID (Ethics Commission 00086977	n Filers)
4	Date 12/23/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
_		Beaumont, TX 77703	T			
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID Phelan, Kathryn Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$32.00
		Beaumont, TX 77702	1 = 1 (0 1 1 11	<u> </u>		
	Housewife	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID Pierce, Vernon Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$486.19
		Beaumont, TX 77706				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/08/2024	Full name of contributor out-of-state PAC (ID Raithel, James Contributor address; City; State; Zip Code Pt. Neches, TX 77651	#:)		Amount of Contribution (\$)	\$300.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID Rao, Sandra Contributor address; City; State; Zip Code Lumberton, TX 77657			Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	■ A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/12 Rpt: 13/33	
2	FILER NAME Jefferson Co	ounty Republican Party		3	Filer ID (Ethics Commission 00086977	ı Filers)
4	Date 10/29/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$16.00
•	Dringing occu	Beaumont, TX 77706 upation / Job title (See Instructions)	Employer (See Instructions			
8	Nurse Ade	pation / Job title (See Instructions)	9 Employer (See Instructions	')		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ Ronquille, Velma (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	5	Beaumont, TX 77713				
	Retired	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ Rose, David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$16.00
		Beaumont, TX 77706				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_Simoneaux, Clifton (Mr.) Contributor address; City; State; Zip Code Nederland, TX 77627			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/08/2024	Full name of contributor out-of-state PAC (ID#:_Smith, Saundra Contributor address; City; State; Zip Code Nederland, TX 77627			Amount of Contribution (\$)	\$32.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUL	E A1	
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/12 Rpt: 14/33	
2	FILER NAME Jefferson Co	unty Republican Party		3	Filer ID (Ethics Commission 00086977	n Filers)
4	Date 11/08/2024	Date 5 Full name of contributor out-of-state PAC (ID#:)			Amount of Contribution (\$)	\$100.00
_		Nederland, TX 77627				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/29/2024 Swartz, Ryan Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$34.00
	Principal occu	Lumberton, TX 77657 Dation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Safety Mana	ger				
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$12.00
		Beaumont, TX 77706				
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	()		
	Date Full name of contributor out-of-state PAC (ID#:) 10/29/2024 Wilson, Ken Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00	
Beaumont, TX 77707 Principal occupation / Job title (See Instructions) Home Builder Employer (See Instruction				5)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/13/2024 Wright, Jay (Mr.) Contributor address; City; State; Zip Code Conroe, TX 77301				Amount of Contribution (\$)	\$25.00
	Principal occu Justice of Ap	pation / Job title (See Instructions) peals	Employer (See Instructions	<u> </u>		
	<u> </u>					

	MONETARY POLITICAL C	SCHEDULE A1	
	The Instruction Guide explains how	to complete this form.	1 Total pages Schedule A1: Sch: 12/12 Rpt: 15/33
2	2 FILER NAME Jefferson County Republican Party		3 Filer ID (Ethics Commission Filers) 00086977
4	5 Full name of contributor Wright, Jay (Mr.) 6 Contributor address; City; St		7 Amount of Contribution (\$) \$25.00
	Conroe, TX 77301		
8	3 Principal occupation / Job title (See Instructions Justice of Appeals	9 Employer (See Instructions)	

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 16/33 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Jefferson County Republican Party 00086977 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 11/25/2024 Dishman, Cindy (Ms.) \$37.96 i Stamps 7 Contributor address; City; State; Zip Code Beaumont, TX 77706 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) Housewife 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

Vertising Expense Event Expense Loan Repayment/Reimbur

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/17 Rpt: 17/33	Jefferson County Republican Party 00086977
4	Date	5 Payee name
	10/29/2024	2023Block Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1.90	1455 Market St. Ste. 600
		san Francisco, CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Service Charge
		ordan dara dornido dinargo
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/01/2024	2023Block Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.93	1455 Market St. Ste. 600
		san Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Credit Card Service Charge
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	o
	Date	Payee name
	11/02/2024	2023Block Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.03	1455 Market St. Ste. 600
	42.00	
		san Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Credit Card Service Charge
	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political (Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 2/17 Rpt: 18/33	Jefferson County Republican Party	00086977
4	Date	5 Payee name	
	11/12/2024	2023Block Inc	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$4.68	1455 Market St. Ste. 600	
		san Francisco, CA 94103	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 003	outside of Texas. Complete Schedule T.
	-		TX, officeholder living expense Service Charge
		Credit Card 3	ervice Charge
_	Computate ONLY if direct	Candidata/Office holder no rec	Office held
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	<u> </u>		
	Date	Payee name	
	11/13/2024	2023Block Inc	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1.03	1455 Market St. Ste. 600	
		san Francisco, CA 94103	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 003	outside of Texas. Complete Schedule T.
			TX, officeholder living expense Service Charge
		Credit Card 3	ervice Charge
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	Complete ONLY if direct expenditure to benefit C/OH	- · · · · · · · · · · · · · · · · · · ·	Office field
	D :		
	Date	Payee name	
	11/18/2024	2023Block Inc	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2.93	1455 Market St. Ste. 600	
		san Francisco, CA 94103	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 003	outside of Texas. Complete Schedule T.
			TX, officeholder living expense Service Charge
		Credit Card S	ocivide Charge
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Cilido Hold

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/17 Rpt: 19/33	Jefferson County Republican Party 00086977
4	Date	5 Payee name
	11/25/2024	2023Block Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.06	1455 Market St. Ste. 600
		san Francisco, CA 94103
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Credit Card Service Charge
		Great Said Service Sharge
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
<u> </u>		
	Date	Payee name
	12/02/2024	2023Block Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.03	1455 Market St. Ste. 600
		san Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Credit Card Service Charge
		Great Card Service Charge
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	
L		
	Date	Payee name
L	12/05/2024	2023Block Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.03	1455 Market St. Ste. 600
		san Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	-	Credit Card Service Charge
		Cleuit Card Service Charge
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	
	•	

SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 4/17 Rpt: 20/33	Jefferson County Republican Party 00086977
4	Date	5 Payee name
	12/10/2024	2023Block Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1.03	1455 Market St. Ste. 600
		san Francisco, CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Credit Card Service Charge
_	Opening the ONLY if allowed	One district Office health and a second seco
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/18/2024	2023Block Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.93	1455 Market St. Ste. 600
		san Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	LAPENDITORE	Check if Austin, TX, officeholder living expense
		Credit Card Service Fee
	0 1 0 0 1 1 1 1	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	<u>'</u>	
	Date	Payee name
	12/06/2024	2023Block Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.03	1455 Market St. Ste. 600
		san Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Credit Card Service Charge
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefit 6/01	·

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/17 Rpt: 21/33	Jefferson County Republican Party 00086977
4	Date	5 Payee name
	12/24/2024	2023Block Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.06	1455 Market St. Ste. 600
		san Francisco, CA 94103
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Service Charge on Donation
		Ground Saint Solvings Sharge on Bernauen
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	d
	Date	Payee name
	11/15/2024	Banks, salome
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.00	2647 Harrison Ave.
	φ125.00	2047 Hallisott Ave.
		Beaumont, TX 77702
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Canvassing Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Texting
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experialiture to benefit C/OI	
	Date	Payee name
	11/26/2024	CARR, DINA (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$96.42	2225 Stillwater Dr.
		Beaumont, TX 77705
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Door Prizes
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 6/17 Rpt: 22/33	Jefferson County Republican Party 00086977						
4	Date	5 Payee name						
	11/19/2024	Carroll, Kate						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$800.00	1208 Roll Road						
		Beaumont, TX 77713						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Reimbursement Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense Campaign expenses						
		Campaigh expenses						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
9	expenditure to benefit C/O							
\vdash	Dete							
	Date	Payee name						
	11/14/2024	City of Pt. Neches						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$33.75	P.O. Box 758						
		Port Neches, TX 77651						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense Water bill Pt. Neches Office						
		volter bill 1 t. receites office						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							
	D .							
	Date	Payee name						
	12/13/2024	City of Pt. Neches						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$33.75	P.O. Box 758						
		Port Neches, TX 77651						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Office Overhead/Rental Expense						
	ZA ZABITORZ	Check if Austin, TX, officeholder living expense						
		water bill						
_	Operation ONE V. C. F.	On didn't lot for a series of the series of						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
-	Total pages Cabadula 54:	· · · · · · · · · · · · · · · · · · ·
1		
L	Sch: 7/17 Rpt: 23/33	Jefferson County Republican Party 00086977
4	Date	5 Payee name
	11/25/2024	Dishman, Cimdy (Ms.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$37.96	8255 Evangeline Lane
	Ψ31.30	ozoo zvangonno zano
		Beaumont, TX 77706
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Stamps
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨	Data	Davisa sama
	Date	Payee name
	12/30/2024	Embracing Freedom
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 12813
		Beaumont, TX 77726
\vdash	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Donation
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/13/2024	Entergy
	Amount (\$)	Payee address; City; State; Zip Code
	\$85.62	P. O. Box 8104
	,	
		Now Orleans, I.A. 70001
		New Orleans, LA 70891
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Electric bill Pt. Neches Office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
Ļ		<u>_</u>					
1	Total pages Schedule F1: Sch: 8/17 Rpt: 24/33	2 FILER NAME Jefferson County Republican Party 3 Filer ID (Ethics Commission Filers) 00086977					
4	Date	5 Payee name					
•							
	11/27/2024	Entergy					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$105.63	P. O. Box 8104					
		New Orleans I A 70001					
		New Orleans, LA 70891					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Office Overhead Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITORE	Check if Austin, TX, officeholder living expense					
		Electric bill/ Pt. Neches					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	1					
H	Date	Davida nama					
		Payee name					
	12/18/2024	Erickson, Cary					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$5,000.00	2314 Oak South					
		Nederland, TX 77627					
		1					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Donation Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense					
		Campaign Fund					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	1					
	Date	Payee name					
	11/07/2024	Evans, Alonha (Ms.)					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$200.00	9235 Riggs					
		Beaumont, TX 77707					
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF	Canvassing Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		Texting					
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica			Legal Services	us Expense	Salaries/V		se s/Contract Labor		OTHER (enter	a category not liste	ed above)
	Credit Card Payment			The Instruction	Guide explain	s how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Comr	nission Filers)
	Sch: 9/17 Rpt: 25/33		Jefferson Co	ounty Republi	can Party					00086977	•	
4	Date	5	Payee name									
	11/06/2024		Evans, Denv	ver (Ms.)								
6	Amount (\$)	7	Payee addres	s; City;	Stat	e; Zip Co	nde					
ľ	\$200.00	ľ	9235 Riggs		Oldi	.c, 2ip 00	uc					
	4200.00		0200111990	O.,								
			Deaument -	TV 77707								
		_	Beaumont, 7									
8	PURPOSE OF	(a)		e Categories listed a	t the top of this s	chedule)	(b)	Description				
	EXPENDITURE		Canvassing					=		de of Texas. Co officeholder livi	mplete Schedule T.	
								Texting	,,	omeenede: iiv	ng expense	
								J				
9	Complete ONLY if direct		Candidate/Offic	eholder name		Office sou	aht			Office I	held	
	expenditure to benefit C/OI	Н					•					
_	Date	Π	Payee name									
	10/29/2024		Evans, Joe (Mr.)								
_	Amount (\$)	H	Payee addres		Stat	e; Zip Co	nde					
	\$400.00		9235 Riggs		Oldi	.c, 2ip 00	uc					
	Ψ-100.00		ozoo raggo	Ot.								
			Beaumont, 1	TV 77707								
_	DUDDOOF	(-)					(I-)					
	PURPOSE OF	(a) 		e Categories listed a	t the top of this s	chedule)	(a)	Description	outei	de of Tevas Co	mplete Schedule T.	
	EXPENDITURE		Polling Expe	ense				_		officeholder livi		
								Canvasssing				
	Complete ONLY if direct		Candidate/Offic	eholder name		Office sou	ght			Office I	held	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	11/27/2024		Evans, Joe ((Mr.)								
	Amount (\$)		Payee addres	s; City;	Stat	e; Zip Co	de					
	\$260.05		9235 Riggs	St.								
			Beaumont, 7	TX 77707								
	PURPOSE	(a)	Category (Se	e Categories listed a	t the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE			ead/Rental E		,			outsi	de of Texas. Co	mplete Schedule T	
	EXPENDITORE							_	, TX,	officeholder livi	ng expense	
								Google				
	Commission ONU Wife allows	Ļ	Danalidet - 100	alaalalar		Office	auk t			Offi:-	la a l al	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offic	enolaer name		Office sou	gnt			Office I	neia	

SCHEDULE F1

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

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to compl	lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 10/17 Rpt: 26/33	Jefferson County Republican Party	00086977
4	Date	5 Payee name	•
	11/13/2024	Evans, Jordayn (Ms.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$200.00	9235 Riggs	
		Beaumont, TX 77707	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Canvassing	Check if travel outside of Texas. Complete Schedule T.
	LAFLINDITORL		Check if Austin, TX, officeholder living expense
			Texting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/O		Office field
_	Data		
	Date 11/09/2024	Payee name Evans Sr,, Joe	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.00	9235 Riggs St.	
		Beaumont, TX 77707	
	PURPOSE OF	,	Description
	EXPENDITURE	canvasing	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Block walking
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	11/12/2024	Greene, Pat (Ms.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$320.67	4400 Morningstar Pl.	
		Beaumont, TX 77705	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
	LAFLINDITORL		Check if Austin, TX, officeholder living expense
			Watch Night Party Supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office hold
	Complete ONLY if direct expenditure to benefit C/Ol	•	Office held
_			

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Officeholder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
	Sch: 11/17 Rpt: 27/33	Jefferson County Republican Party 00086977							
4	Date	5 Payee name							
	12/05/2024	Greene, Pat (Ms.)							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$109.36	4400 Morningstar Pl.							
		Beaumont, TX 77705							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.							
		Cookies & punch							
		Cookies & purion							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
9	expenditure to benefit C/O								
-	Date	Dougo nama							
	12/30/2024	Payee name Croons Pat							
		Greene, Pat							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$134.60	4400 Morningstar Pl.							
		Beaumont, TX 77705							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
EXPENDITURE		Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		Food for meeting with R. Petry							
		1 coa for meeting marran cay							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·							
_	Date	Payee name							
	12/20/2024	Greene, Pat							
		· ·							
	Amount (\$) \$29.20	Payee address; City; State; Zip Code 4400 Morningstar PI.							
	Φ29.20	4400 Morningstal Pl.							
		Beaumont, TX 77705							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		Stamps							
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1: Sch: 12/17 Rpt: 28/33		ler ID (Ethics Commission Filers) 0086977					
4	Date 12/06/2024	5 Payee name Hellberg, Roxanne (Ms.)						
6	Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 1779 Moore Rd.						
L		Beaumont, TX 77713						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation (b) Description Check if travel outside of the companient of	of Texas. Complete Schedule T. ceholder living expense					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought DH	Office held					
	Date	Payee name						
	11/06/2024	Herring, Cherish						
Amount (\$) Payee address; City; State; Zip Code \$125.00 6650 Broad Oak, Trailer #110								
		Beaumont, TX 77713						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Canvassing (b) Description Check if travel outside of the control of the	of Texas. Complete Schedule T. ceholder living expense					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								
	Date 11/06/2024	Payee name Herring, Christian						
	Amount (\$) \$125.00	Payee address; City; State; Zip Code 6650 Broad Oak, Trailer #110						
		Beaumont, TX 77713						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Canvassing (b) Description Check if travel outside of the control of the	of Texas. Complete Schedule T. ceholder living expense					
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought DH	Office held					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
	Sch: 13/17 Rpt: 29/33	Jefferson County Republican Party 00086977							
4	Date	5 Payee name							
	11/04/2024	Hinton, Willis							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$1,750.00	4303 Westridge Ln., Apt 309							
		Beaumont, TX 77706							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Canvassing Check if travel outside of Texas. Complete Schedule T.							
	LAI LINDITORE	Check if Austin, TX, officeholder living expense							
		Block Walking							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
9	expenditure to benefit C/O								
_	Date	David and the second se							
	11/06/2024	Payee name Hinton, Willis							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$500.00	4303 Westridge Ln., Apt 309							
		B							
		Beaumont, TX 77706							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Canvassing Check if travel outside of Texas. Complete Schedule T.							
EXPENDITURE Canvassing Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense									
		Texting							
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/O	1							
	Date	Payee name							
	12/03/2024	Interstate Office Park							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$350.00	1844 IH10 South							
		Beaumont, TX 77707							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Check if Austin, TX, officeholder living expense							
		Monthly Rent							
	Operation Objects "	Openhalder (Office health and a second secon							
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held							

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment									
_	Total manage Calculula E4.									
1	Total pages Schedule F1: Sch: 14/17 Rpt: 30/33	2 FILER NAME Jefferson County Republican Party 3 Filer ID (Ethics Commission Filers) 00086977								
4	Date	5 Payee name								
	12/03/2024	Interstate Office Park								
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 1844 IH10 South Beaumont, TX 77707								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
١	OF									
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly Rent								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	12/31/2024	Interstate Office Park								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$1,200.00	1844 IH10 South								
		Beaumont, TX 77707								
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.								
Check if Austin, 1X, officenoider living expense										
	Monthly Rent									
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·								
	Date	Payee name								
	11/18/2024	Michele's Kitchen								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$375.00	P.O. Box 563								
		Deweyville, TX 77614								
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.								
		Check if Austin, TX, officeholder living expense								
		Food								
_	Complete ONLY if direct	Condidate/Officeholder name Office cought								
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held								
	· 									

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
	Sch: 15/17 Rpt: 31/33	Jefferson County Republican Party 00086977							
4	Date	5 Payee name							
	11/02/2024	Spectrum							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$229.81	P.O. Box 60074							
		City of Industry, CA 91716-0074							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.							
		Check if Austin, TX, officeholder living expense Internet/website							
		internet website							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
9	expenditure to benefit C/OI								
\vdash	Dete								
	Date	Payee name							
	11/07/2024	Spectrum							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$75.39	P.O. Box 60074							
		City of Industry, CA 91716-0074							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		Internet/website							
		internet website							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								
	5 .								
	Date	Payee name							
	12/10/2024	Spectrum							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$75.39	P.O. Box 60074							
		City of Industry, CA 91716-0074							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Office Overhead/Rental Expense							
		Check if Austin, TX, officeholder living expense							
		Internet/Pt.Neches							
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	Complete ONLY if direct expenditure to benefit C/OI								

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 16/17 Rpt: 32/33	Jefferson County Republican Party 00086977						
4	Date	5 Payee name						
	12/16/2024	Spectrum						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$105.40	P.O. Box 60074						
		City of Industry, CA 91716-0074						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense Internet/Beaumont						
		inemer bedamon						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							
F	Date	Payee name						
	12/04/2024	Stellar Bank						
H	Amount (\$)	Payee address; City; State; Zip Code						
	\$101.50	2008 Hwy. 365						
		Nederland, TX 77627						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		GOTO Checks						
		COTO Officiale						
Complete ONLY if direct Candidate/Officeholder name Office sought Office held								
	"							
F	Date	Payee name						
	11/14/2024	The Examiner						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$990.00	795 Willow						
		Beaumont, TX 77701						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	News Paper Ad Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense Candidates' endorsement						
		Candidates endoisement						
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							
\vdash								
l								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica			mmittee	Food/Beverage Expense Gift/Awards/Memorials E Legal Services	e Expense	Polling Experience Printing Experience	nse ense les/Contract Lab		Travel in District Travel Out of Dis		
	Credit Card Payment			The Instruction Gui	de explains l	how to com	olete this forn	n.			
1	Total pages Schedule F1: Sch: 17/17 Rpt: 33/33	2		E County Republicar	n Partv			3	Filer ID 00086977	(Ethics Commission Filers)
┝	Date	5	Payee name								_
	10/29/2024		The Mega								
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Code)				
	\$52.71		2740 SW N	Aartin Downs Blvd	l. #331						
			Palm City ,	FL 34990							
8	PURPOSE	(2)				10	N Docorintio				
ľ	OF	رم _ا	Event Expe	See Categories listed at the	e top of this sche	edule)	Description Check if		ide of Texas. Com	plete Schedule T.	
	EXPENDITURE		LVCIII LXPC	Clisc					, officeholder living		
							merchan	ndise			
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	ficeholder name	C	Office sough	t		Office h	eld	