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. 00082944 3 COMMITTEE NAME **OFFICE USE ONLY** Wilson Co Republican Party Date Received **ELECTRONICALLY FILED** 01/09/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 860 Paddy Rd. Date Hand-delivered or Date Postmarked Change of Address Floresville, TX 78114 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ruby NAME NICKNAME LAST **SUFFIX** Manen STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 860 Paddy Road STREET **ADDRESS** (Residence or Business) Floresville, TX 78114 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 860 Paddy Road MAILING **ADDRESS** Floresville, TX 78114 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (830) 391-0818 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** 07/01/2024 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

2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Wilson Co Republican	Party			00082944	
4 COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				
5 CONTRIBUTION TOTALS	PLEDGES, LOAN CONTRIBUTIONS	ZED POLITICAL CONT S, OR GUARANTEES MADE ELECTRONIC Fort qualifies for the higher	CALLY)	\$	4,573.33
	2. TOTAL POLITION	CAL CONTRIBUTION	ONS	\$	c 2c0 22
	(OTHER THAN P	LEDGES, LOANS, OF	R GUARANTEES OF LOANS)		6,368.33
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ZED POLITICAL EXPE	NDITURES	\$	0.00
	4. TOTAL POLITION	CAL EXPENDITURE	ES	\$	11,584.45
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT		MAINTAINED AS OF THE LAST	DAY \$	43,265.63
OUTSTANDING LOAN TOTALS		AL AMOUNT OF ALL O	DUTSTANDING LOANS AS OF 'OD	THE \$	0.00
6 AFFIDAVIT				<u> </u>	
		true a	ear, or affirm, under penalty of pe and correct and includes all infor er Title 15, Election Code.		
				Manen	
			Signature of Ca	ınpaign measi	irei
AFFIX NOTAR	Y STAMP / SEAL ABOV	Έ			
Sworn to and subscribe	d before me, by the said		, t	his the	day
of	, 20, to certi	fy which, witness my h	nand and seal of office.		
Signature of officer a	dministering oath	Printed name of off	ficer administering oath	Title of office	cer administering oath

SUBTOTALS - CEC FORM CEC COVER SHEET PG 3 3 of 12 7 COMMITTEE NAME Wilson Co Republican Party 18 Filer ID (Ethics Commission Filers) 00082944

17 C	TTIMMC	E NAME	18 Filer ID	(Ethics Commission Filers)		
W	ilson Co	Republican Party	00082944			
19 S0	CHEDULI	SUBTOTALS	•	CURTOTAL AMOUNT		
N/	AME OF	SCHEDULE		SUBTOTAL AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 6,368.33		
2.		\$				
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.		\$				
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 11,584.45		
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). <u> </u>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/12	
2	FILER NAME Wilson Co R	epublican Party		3	Filer ID (Ethics Commission 00082944	n Filers)
4	Date 09/16/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$500.00
_		Floresville, TX 78114				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/20/2024	Full name of contributor out-of-state PAC (ID#:_ Eschenburg, Martha Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$120.00
	Principal occu	Floresville, TX 78114	Employer (See Instructions	_		
	Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/18/2024	Full name of contributor out-of-state PAC (ID#: Gella, Sarah Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$175.00
		Floresville, TX 78114				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/16/2024	Full name of contributor out-of-state PAC (ID#:_Gilchrist, April Contributor address; City; State; Zip Code Stockdale, TX 78160)		Amount of Contribution (\$)	\$120.00
	Principal occu Counselor/C	oation / Job title (See Instructions) onsultant	Employer (See Instructions Self-Employed	5)		
	Date 11/23/2024	Full name of contributor out-of-state PAC (ID#:_Manen, Ruby Contributor address; City; State; Zip Code Floresville, TX 78114			Amount of Contribution (\$)	\$140.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
		<u>,</u>				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
,	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/12	
	FILER NAME Wilson Co R	Republican Party	3	Filer ID (Ethics Commission 00082944	n Filers)	
	Date 11/21/2024	 Full name of contributor out-of-state PAC (ID#:_Quinney, Alene Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$140.00
	Delegational and	Stockdale, TX 78160	la Funtanión			
	Retired	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/30/2024	Full name of contributor out-of-state PAC (ID#:_ Vanek, Philip Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$450.00
		La Vernia , TX 78121				
	Principal occu retired	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 08/21/2024	Full name of contributor out-of-state PAC (ID#:_ Wehmeyer, Jonelle Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$150.00
	Principal occu	Floresville, TX 78114 upation / Job title (See Instructions)	Employer (See Instructions	z) 		
	Interior Desi		Self-Employed	۰)		

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 com	plete this	form.		
1	Total pages Schedule F1:				Filer ID	(Ethics Commission Filers)
_	Sch: 1/7 Rpt: 6/12	Wilson Co Republican Party			00082944	
4	Date 07/19/2024	5 Payee name Ahumada, Oscar				
6	Amount (\$)	7 Payee address; City; State; Zip Code	9			
	\$2,000.00	315 Broken Arrow				
		Floresville, TX 78114				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)) Descr	•		
	OF EXPENDITURE	Republican National Convention		eck if travel outside eck if Austin, TX, o		
						elegate's expenses to
			atten	d Republica	n National (Convention
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt		Office he	eld
	expenditure to benefit C/OI	1				
	Date	Payee name				
	12/19/2024	Cowboy Liquors				
	Amount (\$)	Payee address; City; State; Zip Code	9			
	\$58.44	923 10th Street				
		Ste 104				
		Floresville, TX 78114				
	PURPOSE OF	c , (con amagement maner top or the constant)	Descr	•	.	
	EXPENDITURE	Gift/Awards/Memorials Expense		eck if travel outside eck if Austin, TX, o		
			Awar	d for long se	ervice	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt		Office he	eld
_	Date	Payee name				
	07/15/2024	Finley, Lee				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,000.00	1818 Waterford Lane				
		Richardson, TX 75082				
	PURPOSE OF	, ,	Descr			
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee		eck if travel outside eck if Austin, TX, o		
		Sandidate, Sincerioles, Francis Sentinities		Donation to		
	Complete ONLY if direct	Candidate/Officeholder name Office sough			Office he	eld
	expenditure to benefit C/OI	Finley, Lee Court Of C	riminal A	Appeals,		
l						

SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/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: 2/7 Rpt: 7/12	Wilson Co Republican Party 00082944
4	Date	5 Payee name
	12/03/2024	GoDaddy.com, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$102.21	2155 E GoDaddy Way
		Tempe, AZ 85284
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Microsoft 365 Email Essentials Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Recurring CEC expense
		Resulting SES expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	12/25/2024	GoDaddy.com, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$294.09	2155 E GoDaddy Way
	7-2 3323	
		Tempe, AZ 85284
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Website & Marketing Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Recurring CEC expense
	Operation ONLY if disease	Outside to 10 ff and add as a second to the
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/05/2024	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$87.33	14414 US Hwy 87 W
		La Marria TV 70404
		La Vernia, TX 78121
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Sandwiches, Fruit Trays, Chips for election workers
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	7

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 t	this form.
1	Total pages Schedule F1: Sch: 3/7 Rpt: 8/12	FILER NAME Wilson Co Republican Party	3 Filer ID (Ethics Commission Filers) 00082944
4	Date 12/19/2024	5 Payee name HEB	·
6	Amount (\$) \$75.76	7 Payee address; City; State; Zip Code 925 10th Street	
8	PURPOSE OF EXPENDITURE	Gift/Awards/Memorials Expense	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ward for Long Service
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 07/31/2024	Payee name Manen, Ruby	
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 860 Paddy Rd Floresville, TX 78114	
	PURPOSE OF EXPENDITURE	Advertising Expense	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense eimbursement for preparing/printing advertising culars
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 08/13/2024	Payee name Manen, Ruby	
	Amount (\$) \$65.00	Payee address; City; State; Zip Code 860 Paddy Rd	
		Floresville, TX 78114	
	PURPOSE OF EXPENDITURE	Advertising Expense	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense eimbursement for preparation and printing of emmunity circulars
	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 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 (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: 4/7 Rpt: 9/12	Wilson Co Republican Party 00082944
4	Date	5 Payee name
	09/09/2024	Mrs. Annies Peanut Patch
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$29.64	1019 B Street
		Floresville, TX 78114
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Speaker's gift
_	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/Ol	
	Data	
	Date	Payee name
	07/20/2024	Office Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.85	8266 Agora Parkway
		Selma, TX 78154
	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 Supplies for CEC Organizational Meeting
		Supplies for SES organizational meeting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/30/2024	River Bend Golf Course
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	101 Club Drive
	Ψ300.00	101 Glub Blive
		Floresville, TX 78114
		I m
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Fivent 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
		Deposit for Republican Christmas Party
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
_		

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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 5/7 Rpt: 10/12	Wilson Co Republican Party 00082944
4	Date	5 Payee name
	12/19/2024	River Bend Golf Course
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,883.34	101 Club Drive
		Floresville, TX 78114
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. Check if Austin, TX, officeholder living expense
		Venue, Catering for Republican Christmas Party
		Table Tabl
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	08/20/2024	Signs by Bernardo Diaz
H	Amount (\$)	Payee address; City; State; Zip Code
	\$3,204.20	10301 N 26th Street
		McAllen, TX 78504
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense County Political Signs
		County Foliation Signif
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	08/13/2024	Texas Federation of Republican Women
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$83.33	13740 N Hwy 183
		Ste J4
		Austom, TX 78750-1832
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
		Check if Austin, TX, officeholder living expense Award for Tribute to Women
		Award for fribute to Women
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/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: 6/7 Rpt: 11/12	Wilson Co Republican Party 00082944
4	Date	5 Payee name
	10/21/2024	UPS Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$638.68	923 10th Street
		Floresville, TX 78114
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Event Program
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
H	Date	Power name
	10/18/2024	Payee name Walmart
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$77.82	6102 FM 3009
		Schertz, TX 78154
	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 7 Reams of Legal-Size Paper
		Tround of Legal Gize Faper
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
⊨	Date	Payee name
	08/27/2024	Walmart
	Amount (\$)	Payee address; City; State; Zip Code
	\$132.68	2100 SE Loop 410
		San Antonio, TX 78220
	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
		HP Ink Cartridges and Copier Paper
		The fine Gardiages and Copier raper
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Co	mmittee	Gift/Awa Legal S	everage Expense ards/Memorials Expe ervices astruction Guide			pense ages/	Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:	2	FILER NAM	1E						3	Filer ID	(Ethics Commission Filers)
	Sch: 7/7 Rpt: 12/12				olican Party						00082944	
4	Date	5	Payee nam	е								
	08/14/2024		Wilson Co		ews							
6	Amount (\$)	7	Payee addr	ess;	City;	State;	Zip Cod	de				
	\$201.08		1012 C St	reet								
			Floresville	, TX 78	3114							
8	PURPOSE	(a)	Category (See Categ	ories listed at the to	p of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Advertising					ļ	_		de of Texas. Com	
								I	Check if Austin Special Even		officeholder living	expense
								,	Special Everi	IL		
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:		0 11 1 10	·							0.00	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Of	nicenoid	ier name	U	office soug	Jrit			Office he	eia
_												