FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00087637 3 COMMITTEE NAME **OFFICE USE ONLY** Denton County Republican Lincoln Cabinet Date Received **ELECTRONICALLY FILED** 01/07/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 50748 Date Hand-delivered or Date Postmarked Change of Address Denton, TX 76206 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Kellie NAME NICKNAME LAST **SUFFIX** Mason STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 4120 Austin Circle STREET **ADDRESS** (Residence or Business) Sanger, TX 76266 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 50748 MAILING **ADDRESS** Denton, TX 76206 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (940) 395-9377 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer 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 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Denton County Republic	can Lincoln Cabinet			00087637	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Rep	ublican		
(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.)				
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTR OR GUARANTEES O IADE ELECTRONICA qualifies for the higher ite	LLY)	\$	0.00
	2. TOTAL POLITICA	L CONTRIBUTION		\$	72,641.96
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENI	DITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	3	\$	56,740.38
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING		INTAINED AS OF THE LAST	DAY \$	188,454.69
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OU REPORTING PERIOD	TSTANDING LOANS AS OF	THE \$	0.00
6 AFFIDAVIT				<u> </u>	
		true and	, or affirm, under penalty of pe d correct and includes all infor Title 15, Election Code.		
			Man Ko	llia Magan	
			Signature of Ca	llie Mason	ror
AFFIX NOTARY	STAMP / SEAL ABOVE		Signature of Ca	impaigir rreasu	iei
Cwarn to and subseribed	hoforo mo butho cold		LL.	hic the	dov
of			, ti	nis the	day
U	, 20, to coruly t	which, whiless my had	a and sear or office.		
Signature of officer adr	ministering oath	Printed name of office	er administering oath	Title of offic	cer administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

					3 of 30
17 CO	MMITTE	E NAME	18 Filer ID	(Ethics Commission	Filers)
l		punty Republican Lincoln Cabinet	00087637	(,
			0000.001	Τ	
l		E SUBTOTALS SCHEDULE		SUBTOTAL AN	/OUNT
INA	IVIE OF .	SCHEDULE			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	72,641.96
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION)R	\$	
5.		\$			
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	56,740.38
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL C	S		SCHEDUL	E A1	
	The Instru	ction Guide explains how	to complete this form	n.	1	Total pages Schedule A1: Sch: 1/13 Rpt: 4/30	
2	FILER NAME Denton Cour	nty Republican Lincoln Cabinet			3	Filer ID (Ethics Commission 00087637	n Filers)
4	Date 12/31/2024	5 Full name of contributor Babcock, Terence	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$932.67
8		Denton, TX 76207 pation / Job title (See Instructions)	9	Employer (See Instructions	j 5)		
	Date 11/05/2024	Full name of contributor Bassel, Dabney Contributor address; City; Sta		Retired		Amount of Contribution (\$)	\$209.00
	Principal occu Appeals Cou	Fort Worth, TX 76112 pation / Job title (See Instructions) irt Justice		Employer (See Instructions State of Texas	<u> </u> ;)		
	Date 12/04/2024	Full name of contributor [Bassel, Dabney Contributor address; City; Sta	out-of-state PAC (ID#:te; Zip Code			Amount of Contribution (\$)	\$209.00
	Principal occu	Fort Worth, TX 76112 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Appeals Cou			State of Texas	,		
	Date 10/31/2024	Full name of contributor [Bates, Diane Contributor address; City; Sta Trophy Club, TX 76262	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$209.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u> </u> 5)		
	Date 12/03/2024	Full name of contributor Bates, Diane Contributor address; City; Sta Trophy Club, TX 76262	out-of-state PAC (ID#:te; Zip Code)		Amount of Contribution (\$)	\$209.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUI	E A1
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	otal pages Schedule A1: Sch: 2/13 Rpt: 5/30	
2	FILER NAME				3 F	Filer ID (Ethics Commission	on Filers)
	Denton Cour	nty Republican Lincoln Cabine	t			00087637	
4	Date 11/27/2024	5 Full name of contributor Bayuk, Todd6 Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code			Amount of Contribution (\$)	\$621.78
		Argyle, TX 76226					
8	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> s)		
	Credit Manag			American Honda Financ		orp	
_	Date	Full name of contributor	out-of-state PAC (ID#:	\	Τ	Amount of Contribution (\$)	
	12/11/2024	Bellinghausen, Karen Contributor address; City; Sta			<i>'</i>	who are or Contribution (\$)	\$310.89
		Dallas, TX 75252					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Business Ow	vner		Aspen Wellness Freque	encies	5	
	Date 12/18/2024	Full name of contributor Benavides, Lewis Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code			Amount of Contribution (\$)	\$300.00
		Crossroads, TX 76227					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> s)		
	Retired			Retired			
	Date 12/11/2024	Full name of contributor Bishop-Elliott, Sharon Contributor address; City; Sta				nmount of Contribution (\$)	\$310.89
	Principal occur Assessment	pation / Job title (See Instructions) Coordinator		Employer (See Instructions Self	s)		
	Date 12/31/2024	Full name of contributor Brandon Gill for Congress Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code			Amount of Contribution (\$)	\$1,813.52
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONT	FRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to co	mplete this forr	n.	1	Total pages Schedule A1: Sch: 3/13 Rpt: 6/30	
2	FILER NAME Denton Cour	nty Republican Lincoln Cabinet			3	Filer ID (Ethics Commission 00087637	n Filers)
4)	7	Amount of Contribution (\$)	\$209.00
8	Principal occu	Denton, TX 76209 pation / Job title (See Instructions)	9	Employer (See Instructions State of Texas)		
	Date 11/29/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:			Amount of Contribution (\$)	\$209.00
	Principal occu Judge	pation / Job title (See Instructions)		Employer (See Instructions State of Texas)		
	Date 12/30/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:)		Amount of Contribution (\$)	\$209.00
	Delicational	Denton, TX 76209		(O to to the time			
	Judge	pation / Job title (See Instructions)		Employer (See Instructions State of Texas)		
	Date 11/05/2024	Core, Marc Contributor address; City; State; Zip	of-state PAC (ID#:)		Amount of Contribution (\$)	\$209.00
	Principal occu	Frisco, TX 75034 pation / Job title (See Instructions)		Employer (See Instructions Self)		
	Date 12/16/2024	Core, Marc	of-state PAC (ID#:			Amount of Contribution (\$)	\$209.00
	Principal occu CPA	pation / Job title (See Instructions)		Employer (See Instructions Self)		

	MONEI	ARY POLITICAL (SCHEDUI	E A1		
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 4/13 Rpt: 7/30	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Denton Cour	nty Republican Lincoln Cabine	et			00087637	
4	Date 11/20/2024	5 Full name of contributor Costa, Dianne6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code		7	Amount of Contribution (\$)	\$209.00
		Highland Village, TX 7507	7				
8	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date 12/20/2024	Full name of contributor Costa, Dianne Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$209.00
	Data disal assess	Highland Village, TX 7507		Formless (Co.) In atmostic to	Ĺ		
	Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date 12/11/2024	Full name of contributor Del Orbe, Sueconia Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$155.45
		Flower Mound, TX 75028					
	Principal occu Entreprenue	pation / Job title (See Instructions r)	Employer (See Instructions	5)		
	Date 12/18/2024	Full name of contributor Delin, John Contributor address; City; St Roanoke, TX 76262	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$1,139.93
	Principal occu Business Ow	pation / Job title (See Instructions vner)	Employer (See Instructions Integrity Group, LLC/Lac		a Living	
	Date 12/18/2024	Full name of contributor Delin, John Contributor address; City; St Roanoke, TX 76262	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$777.22
	Principal occu Business Ow	pation / Job title (See Instructions vner)	Employer (See Instructions Integrity Group, LLC/Lac		a Living	

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS	SCHEDULE A1	-
	The Instruc	ction Guide explains how	to complete this fo	rm.	1 Total pages Schedule A1: Sch: 5/13 Rpt: 8/30	
2	FILER NAME				3 Filer ID (Ethics Commission Filers)	1
	Denton Cour	nty Republican Lincoln Cabinet	<u> </u>		00087637	
4	Date 11/12/2024	5 Full name of contributor [Denton, Jason6 Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code		7 Amount of Contribution (\$) \$209	.00
		Frisco, TX 75034				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	ns)	
	Business Ow			Reliable Technology Se		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	12/11/2024	Denton, Jason Contributor address; City; Sta			\$209 	.00
		Frisco, TX 75034				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	ns)	
	Business Ow			Reliable Technology Se		
	Date 12/02/2024	Full name of contributor Enloe, Amy Contributor address; City; Sta	out-of-state PAC (ID#:		Amount of Contribution (\$) \$625	.00
		Denton, TX 76207				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	ns)	
	Retired			Retired		
	Date 12/26/2024	Full name of contributor Field, Stan Contributor address; City; Sta Denton, TX 76207	out-of-state PAC (ID#: ite; Zip Code		Amount of Contribution (\$)	.89
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	ls)	
	Retired	,		Retired	,	
	Date 11/20/2024	Full name of contributor Goline, Greg Contributor address; City; Sta	out-of-state PAC (ID#:		Amount of Contribution (\$)	.00
		Denton, TX 76209				
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Goline & Roland Law Fi		

	MONET	ARY POLITICAL C	IS		SCHEDUI	LE A1	
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 6/13 Rpt: 9/30	
2	FILER NAME Denton Cour	nty Republican Lincoln Cabine	t		3	Filer ID (Ethics Commission 00087637	on Filers)
4	Date 12/20/2024	5 Full name of contributor Goline, Greg6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$209.00
8	Dringing con	Denton, TX 76209	I ₀ .	Employer (See Instructions			
•	Attorney	pation / Job title (See Instructions)	9	Goline & Roland Law Fi			
	Date 11/05/2024	Full name of contributor Handler, Vince Contributor address; City; Sta				Amount of Contribution (\$)	\$209.00
	Principal occu	Aubrey, TX 76227 pation / Job title (See Instructions)		Employer (See Instructions	·/		
	Attorney	pation / 30b title (3ee mstractions)		Self	•)		
	Date 12/04/2024	Full name of contributor Handler, Vince Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$209.00
		Aubrey, TX 76227					
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 12/16/2024	Full name of contributor Hannah, Mark Contributor address; City; Sta Denton, TX 76210	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 11/20/2024	Full name of contributor Haughton, John Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$518.15
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Haughton Law Group	5)		
			'				

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS	SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1 Total pages Schedule A1: Sch: 7/13 Rpt: 10/30	
2	FILER NAME Denton Cour	nty Republican Lincoln Cabine	t		3 Filer ID (Ethics Commission 00087637	n Filers)
4	Date 12/18/2024	Full name of contributor Hayes, Richard Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code		7 Amount of Contribution (\$)	\$6,217.80
	Dringing occu	Denton, TX 76201		2 Employer (Con Instructions		
8	Attorney	upation / Job title (See Instructions)		9 Employer (See Instructions Hayes, Berry, White & \	/anzant LLP	
	Date 11/27/2024	Full name of contributor Howell, Jayne Contributor address; City; Sta	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$2,590.75
	Principal occu	Denton, TX 76205 upation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	5)	
	Real Estate			Withers Howell Real Es		
	Date 11/18/2024	Full name of contributor Johnson, Pam Contributor address; City; Sta	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$209.00
		Denton, TX 76210				
	Principal occu Paralegal	upation / Job title (See Instructions)		Employer (See Instructions Self	<u> </u>	
	Date 12/18/2024	Full name of contributor Johnson, Pam Contributor address; City; Sta Denton, TX 76210			Amount of Contribution (\$)	\$209.00
	Principal occu Paralegal	upation / Job title (See Instructions)		Employer (See Instructions Self	5)	
	Date 12/26/2024	Full name of contributor Kelly, Jenny Contributor address; City; Sta	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$1,400.00
	Principal occu Marketing Di	upation / Job title (See Instructions) irector	,	Employer (See Instructions Point Bank	5)	

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/13 Rpt: 11/30		
2	FILER NAME Denton Cour	nty Republican Lincoln Cabinet		3	Filer ID (Ethics Commission 00087637	on Filers)	
4	Date 11/27/2024	 Full name of contributor out-of-state PAC (ID#:_Kerestine, Julia Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$209.00	
_	Deignigal	Lantana, TX 76226	D. Frankrick (Co. Instructions				
8	Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self)			
	Date 12/27/2024	Full name of contributor out-of-state PAC (ID#:_ Kerestine, Julia Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$209.00	
	Principal occu	Lantana, TX 76226 spation / Job title (See Instructions)	Employer (See Instructions				
	Attorney	pation / sob title (see instructions)	Self	,			
	Date 11/27/2024	Full name of contributor out-of-state PAC (ID#:_ King, Frank Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$209.00	
		Denton, TX 76207					
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)			
	Date 12/24/2024	Full name of contributor out-of-state PAC (ID#:_King, Frank Contributor address; City; State; Zip Code Denton, TX 76207			Amount of Contribution (\$)	\$209.00	
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)			
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Kronda Thimesch Campaign Contributor address; City; State; Zip Code Lewisville, TX 75077)		Amount of Contribution (\$)	\$1,700.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ETARY POLITICAL CONTRIBUTIONS					SCHEDU	LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.		1	Total pages Schedule A1: Sch: 9/13 Rpt: 12/30	
2	FILER NAME Denton Cour	nty Republican Lincoln Cabine	et			3	Filer ID (Ethics Commission 00087637	on Filers)
4	Date 11/27/2024	5 Full name of contributorKronda Thimesch Campa6 Contributor address; City; St	-			7	Amount of Contribution (\$)	\$2,590.75
		Lewisville, TX 75077						
8	Principal occu	pation / Job title (See Instructions)	9 Employe	er (See Instructions	s)		
	Date 12/26/2024	Full name of contributor Lassahn, Allison Contributor address; City; St	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$1,606.27
	Dringing Lagge	Highland Village, TX 7507	-	Employ	or (Coo Instructions	<u></u>		
	Principal occu Proposal Co	pation / Job title (See Instructions ordinator)	Trimble	er (See Instructions e, Inc.	5)		
	Date 11/29/2024	Full name of contributor Lines, Jefferson Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code				Amount of Contribution (\$)	\$209.00
	Data disal asses	Flower Mound, TX 75022	, I		(C latti			
	•	pation / Job title (See Instructions npaign Administration)	Self	er (See Instructions	s)		
	Date 12/30/2024	Full name of contributor Lines, Jefferson Contributor address; City; St Flower Mound, TX 75022	out-of-state PAC (ID#:_ ate; Zip Code)	•	Amount of Contribution (\$)	\$209.00
	•	pation / Job title (See Instructions npaign Administration)	Employe Self	er (See Instructions	5)		
	Date 10/30/2024	Full name of contributor Lipscomb D.D.S, Scott (D Contributor address; City; St Cross Roads, TX 76227)		Amount of Contribution (\$)	\$209.00
	Principal occu Dentist	pation / Job title (See Instructions)	Employe Self	er (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIB	S		SCHEDUI	E A1	
	The Instruc	ction Guide explains how to complete	e this forr	n.	1	Total pages Schedule A1: Sch: 10/13 Rpt: 13/30	
2	FILER NAME Denton Cour	nty Republican Lincoln Cabinet			3	Filer ID (Ethics Commission 00087637	on Filers)
4	Date 12/02/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$209.00
8	Principal occu	Cross Roads, TX 76227	اه	Employer (See Instructions	<u>''</u>		
<u> </u>	Dentist	pation / Job title (See Instructions)		Employer (See Instructions Self	·)		
	Date 12/31/2024	Full name of contributor out-of-state P. Lipscomb D.D.S, Scott (Dr.) Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$209.00
	Dringing Loon	Cross Roads, TX 76227		Employer (Coa Instructions	<u></u>		
	Dentist	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 12/04/2024	Full name of contributor out-of-state P. Mason, Kellie Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$6,217.80
		Sanger, TX 76266			<u> </u>		
	Finance and	pation / Job title (See Instructions) Accounting		Employer (See Instructions Rock On Framing, Inc.	5)		
	Date 12/04/2024	Full name of contributor out-of-state P. Mason, Perry Contributor address; City; State; Zip Code Sanger, TX 76266	,)	•	Amount of Contribution (\$)	\$518.15
	Principal occu Business Ow	pation / Job title (See Instructions) vner		Employer (See Instructions Rock On Framing, Inc.	5)		
	Date 11/20/2024	Full name of contributor out-of-state P. McClung, Debra Contributor address; City; State; Zip Code Little Elm, TX 75068)		Amount of Contribution (\$)	\$209.00
	Principal occu Business Ov	pation / Job title (See Instructions) vner		Employer (See Instructions Oxypro Solutions	5)		
			I				

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1			
	The Instru	ction Guide explains how to	1.	1	Total pages Schedule A1: Sch: 11/13 Rpt: 14/30				
2	FILER NAME	nty Republican Lincoln Cabinet			3	Filer ID (Ethics Commission 00087637	on Filers)		
4	Date 12/20/2024	5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$209.00			
8	Dringinal occu	Little Elm, TX 75068	lo lo	Employer (See Instructions					
0	Business Ow	pation / Job title (See Instructions) vner		Employer (See Instructions Oxypro Solutions)				
	Date 12/18/2024				Amount of Contribution (\$)	\$1,450.82			
	Argyle, TX 76226 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Employer (See Instructions)					
	Business Owner			Mac's Roofing Construc		n & Restoration			
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$310.89		
		The Colony, TX 75056							
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)				
	Date Full name of contributor O'Neill, Angela Contributor address; City; State; Zip Code Flower Mound, TX 75022)		Amount of Contribution (\$)	\$625.00			
Principal occupation / Job title (See Instructions) Homemaker			Employer (See Instructions Self)					
	Date Full name of contributor out-of-state PAC (ID#:) Pausman, Karen Contributor address; City; State; Zip Code DENTON, TX 76210			Amount of Contribution (\$)	\$625.00				
		pation / Job title (See Instructions) er for Senator Drew Springer		Employer (See Instructions State of Texas)				
	nica manayi	er for Schalor Diew Sphiliger		Sidic of 16xas					

	MONEI	ARY POLITICAL C	SCHEDULE A1			
	The Instruc	ction Guide explains how	rm.	1 Total pages Schedule A Sch: 12/13 Rpt: 15/3		
2	FILER NAME				3 Filer ID (Ethics Comn	nission Filers)
	Denton Cour	nty Republican Lincoln Cabine	t		00087637	
4	Date 12/04/2024	 Full name of contributor Pennington, Paul Contributor address; City; States 	out-of-state PAC (ID#: atte; Zip Code		7 Amount of Contribution	(\$) \$1,700.00
		Carrollton, TX 75007				
8	Principal occu	pation / Job title (See Instructions)	9	9 Employer (See Instructions	ns)	
	Tax Consulta	ant		P.E. Pennington & Co.,	, Inc.	
	Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution	(\$) \$6,000.00	
		Denton, TX 76201				
	Principal occupation / Job title (See Instructions)			Employer (See Instructions	ns)	
	Attorney			Law Offices of Tim Pow	wers	
	Date 11/18/2024	Full name of contributor Roehrs, Valerie Contributor address; City; Sta	out-of-state PAC (ID#:)	Amount of Contribution	(\$) \$2,500.00
		Argyle, TX 76226				
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	ns)	
			out-of-state PAC (ID#:)	Amount of Contribution	(\$) \$6,217.80
	Principal occupation / Job title (See Instructions) Retired			Employer (See Instructions Retired	ns)	
	Date 12/26/2024	Full name of contributor Tate, Jill Contributor address; City; Sta	out-of-state PAC (ID#:		Amount of Contribution	(\$) \$1,450.82
	Principal occu Homemaker	pation / Job title (See Instructions)		Employer (See Instructions Self	ns)	

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A			
	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 13/13 Rpt: 16/30	
2	FILER NAME Denton Cour	ILER NAME Denton County Republican Lincoln Cabinet			Filer ID (Ethics Commission 00087637	on Filers)
4	Date 12/26/2024	_ `		7	Amount of Contribution (\$)	\$1,450.82
_		Argyle, TX 76226				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/27/2024				Amount of Contribution (\$)	\$209.00
	Dringing aggr	Carrollton, TX 75007	Employer (See Instructions			
	Principal occupation / Job title (See Instructions) Consultant Employer (See Instruction Self) 			
	Date Full name of contributor out-of-state PAC (ID#:) 12/11/2024 Waye, Dawn Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$155.45
		Krugerville, TX 76227				
	Principal occu Tax Assesso	pation / Job title (See Instructions) or-Collector	Employer (See Instructions Denton County)		
	Date 12/26/2024	Full name of contributor out-of-state PAC (ID#:_ Wickert, Elizabeth Contributor address; City; State; Zip Code Denton, TX 76207)		Amount of Contribution (\$)	\$155.45
Principal occupation / Job title (See Instructions) Employer (Retired Retired			Employer (See Instructions Retired)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Wilson, Kirk Contributor address; City; State; Zip Code Dallas, TX 75229)		Amount of Contribution (\$)	\$10,363.00
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions T Wilson Associates)		

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

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

Contributions/ Donations Made By - Gitt/Awards/Memorials Expense Printing				
Credit Cara r ayment	The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers	3)		
Sch: 1/14 Rpt: 17/30	Denton County Republican Lincoln Cabinet 00087637			
4 Date	5 Payee name			
12/09/2024	American Patriotic Services			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1,000.00	5077 Fruitville Road, Ste 109, #267			
Expenditure from corporate funds	Sarasota, TX 34232			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF	Event Expense			
EXPENDITURE	Check if Austin, TX, officeholder living expense			
	Deposit to musical entertainment group for			
	performances at the PAC's annual gala.			
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI	л			
Date	Payee name			
10/30/2024	Anedot			
Amount (\$)	Payee address; City; State; Zip Code			
\$17.32	1340 Poydras Street Suite 1770			
Expenditure from corporate funds	New Orleans, LA 70112			
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			
	Bank fees			
Commission ONII V if dispost	Condidate/Office helder no year			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H			
Date	Payee name			
10/31/2024	Anedot			
Amount (\$)	Payee address; City; State; Zip Code			
\$8.66	1340 Poydras Street Suite 1770			
- "				
Expenditure from corporate funds	New Orleans, LA 70112			
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.			
EXPENDITURE	Check if Austin, TX, officeholder living expense			
	Bank fees			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
experiorare to benefit C/Of	л			

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

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/14 Rpt: 18/30	Denton County Republican Lincoln Cabinet 00087637
4 Date	5 Payee name
11/05/2024	Anedot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$17.32	1340 Poydras Street Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
8 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 Bank fees
	Dank ICCS
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/12/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$8.66	1340 Poydras Street Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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 Bank fees
	Dalik lees
Commission ONII V if diment	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
·	
Date	Payee name
11/12/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$33.96	1340 Poydras Street Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Bank fees
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 Committee

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
oroun out a transme	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/14 Rpt: 19/30	Denton County Republican Lincoln Cabinet 00087637
4 Date	5 Payee name
11/18/2024	Anedot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$108.96	1340 Poydras Street Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
8 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.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Bank fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experialiture to benefit C/O	1
Date	Payee name
11/20/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$8.66	1340 Poydras Street Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Bank fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
11/20/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$8.66	1340 Poydras Street Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
•	1
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Ranking Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Bank fees
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

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Prir		pense ages/Contract Labor	Travel III District Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3 Filer ID	(Ethics Commission Filers)
	Sch: 4/14 Rpt: 20/30		Denton County Republican Lincoln Cabine	et		00087637	
4	Date	5	Payee name				
L	11/27/2024	L	Anedot				
6	Amount (\$)	7	Payee address; City; State; Zi	ip Cod	le		
	\$8.66		1340 Poydras Street Suite 1770				
_	- Formanditus Comm						
L	Expenditure from corporate funds		New Orleans, LA 70112				
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule	e) ((b) Description		
	OF EXPENDITURE		Accounting/Banking		=	outside of Texas. Com	
					Bank fees	, TX, officeholder living	g expense
					Dank 1663		
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office	e soug	ht	Office he	<u></u>
9	expenditure to benefit C/OF		Sandidate/Onicendide Hame Office	ie soug	nit.	Office He	Jiu
	Date		Payee name				
	11/27/2024		Anedot				
	Amount (\$)		Payee address; City; State; Zi	ip Cod	le		
	\$8.66		1340 Poydras Street Suite 1770				
	Expenditure from corporate funds		New Orleans, LA 70112				
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule	e) ((b) Description		
	OF EXPENDITURE		Accounting/Banking		<u> </u>	outside of Texas. Com	
					Bank fees	, TX, officeholder living	j experise
					Dank 1003		
_	Complete ONLY if direct		Candidate/Officeholder name Office	e soug	ht	Office he	5 \
	expenditure to benefit C/OF		Office Officerolder Harite	.5 50ug		Silice III	···
	Date		Payee name				
	11/29/2024		Anedot				
	Amount (\$)	<u> </u>	Payee address; City; State; Zi	ip Cod	le		
	\$17.32		1340 Poydras Street Suite 1770				
	, 		. ,				
	Expenditure from corporate funds		New Orleans, LA 70112				
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule	e) ((b) Description		
	OF EXPENDITURE		Accounting/Banking		ш	outside of Texas. Com	
	ZAI ENDITORE				ш	, TX, officeholder living	g expense
					Bank fees		
	Commission ONE V. C. P.	L_	Consideration of the character of the ch		.la.e	0/" :	- I al
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office	e soug	m	Office he	eiu
Eor	me provided by Tayas E	thic	e Commission www.athics.state	ם tv ויכ			Version V// 1 0 Edd2ace2

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

Candidate/Officeholder/Politica Credit Card Payment	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: 5/14 Rpt: 21/30	Denton County Republican Lincoln Cabinet 00087637
4 Date	5 Payee name
12/02/2024	Anedot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$33.96	1340 Poydras Street Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Bank fees
	Built 1663
Complete CNI V if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
12/03/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$8.66	1340 Poydras Street Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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
	Bank fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ever	
Date	Payee name
12/04/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$17.32	1340 Poydras Street Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Bank fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe 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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	d 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: 6/14 Rpt: 22/30	Denton County Republican Lincoln Cabinet 00087637
4 Date	5 Payee name
12/11/2024	Anedot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$8.66	1340 Poydras Street Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Bank fees
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
12/16/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$8.66	1340 Poydras Street Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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 Bank fees
	Dalik lees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	
Date	Payee name
12/18/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$8.66	1340 Poydras Street Suite 1770
Expenditure from	
corporate funds	New Orleans, LA 70112
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 Bank fees
	Dalik lees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	

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		Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	Salaries	Expens /Wages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission Filers)	_
	Sch: 7/14 Rpt: 23/30	Denton Co	unty Republican Lind	coln Cabinet				00087637		
4	Date	5 Payee name	е							
	12/20/2024	Anedot								
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip C	ode					
	\$17.32	1	ras Street Suite 1770	0						
	Expenditure from corporate funds		ns, LA 70112							
8	PURPOSE	(a) Category	See Categories listed at the top	of this schedule)	(b)	Description				
	OF	Accounting				_ ·	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE					—	, TX,	officeholder living	expense	
						Bank fees				
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office so	ught			Office he	eld	
	Date	Payee name								_
	12/24/2024	Anedot								
	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode					
	\$8.66	1		, ,	oue					
	φο.00	1340 P0y0	ras Street Suite 1770	J						
	Expenditure from corporate funds	New Orlea	ns, LA 70112							
	PURPOSE	(a) Category (See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Accounting				=		de of Texas. Com		
	ZA ZIIDII GRZ						, TX,	officeholder living	expense	
						Bank fees				
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office so	ught			Office he	eld	
	Date	Payee name	9							
	12/27/2024	Anedot								
	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode					
	\$17.32	· ·	ras Street Suite 1770							
	Expenditure from corporate funds	New Orlea	ns, LA 70112							
	PURPOSE	(a) Category (See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Accounting	g/Banking					de of Texas. Com		
						Check if Austin Bank fees	, TX,	officeholder living	expense	
						Dalik iees				
					1					
	Complete ONLY if direct expenditure to benefit C/OH		ficeholder name	Office so	ught			Office he	eld	

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 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
OTHER (orbegoeder) and listed above)

Candidate/Officeholder/Politica Credit Card Payment	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: 8/14 Rpt: 24/30	Denton County Republican Lincoln Cabinet 00087637
4 Date	5 Payee name
12/30/2024	Anedot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$17.32	1340 Poydras Street Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Bank fees
	Bunk 1003
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
12/31/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$8.66	1340 Poydras Street Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Bank fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit Great	
Date	Payee name
12/05/2024	Best Name Badges
Amount (\$)	Payee address; City; State; Zip Code
\$93.51	1700 NW 65th Ave., Suite 4
Expenditure from corporate funds	Plantation, TX 33313
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Member personalized name badges
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialities to beliefft G/Of	

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: 9/14 Rpt: 25/30	Denton County Republican Lincoln Cabinet 00087637
4 Date	5 Payee name
11/14/2024	Bistecca Steakhouse
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,060.00	2300 Highland Village Rd.
Expenditure from corporate funds	Highland Village, TX 75077
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense
_/	Check if Austin, TX, officeholder living expense
	Quarterly PAC Member Luncheon
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/16/2024	Chestnut Catering
Amount (\$)	Payee address; City; State; Zip Code
\$1,600.00	107 W Hickory St
Expenditure from corporate funds	Denton, TX 76201
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 PAC reception honoring Denton County
	elected officials whose terms ended 12/31/2024.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/20/2024	ClickBid
Amount (\$)	Payee address; City; State; Zip Code
\$18.14	800 E. Ellis Rd STE 533
,	
Expenditure from corporate funds	Norton Shores, MI 49441
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
	Bank fees
Complete ONII V If all a	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
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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/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 10/14 Rpt: 26/30	Denton County Republican Lincoln Cabinet 00087637
4 Date	5 Payee name
11/27/2024	ClickBid
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$413.12	800 E. Ellis Rd STE 533
Expenditure from corporate funds	Norton Shores, MI 49441
8 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
	Bank fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/61	'
Date	Payee name
12/04/2024	ClickBid
Amount (\$)	Payee address; City; State; Zip Code
\$295.26	800 E. Ellis Rd STE 533
, , , , , , , , , , , , , , , , , , , ,	
Expenditure from corporate funds	Norton Shores, MI 49441
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.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Bank fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialiture to beliefit C/O	'
Date	Payee name
12/11/2024	ClickBid
Amount (\$)	Payee address; City; State; Zip Code
\$406.23	800 E. Ellis Rd STE 533
\$100.20	333 E. Ellio I (d 6 I E 333
Expenditure from corporate funds	Norton Shores, MI 49441
PURPOSE	· · · · · · · · · · · · · · · · · · ·
OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Bank fees
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 C

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

Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 11/14 Rpt: 27/30	Denton County Republican Lincoln Cabinet 00087637
4 Date	5 Payee name
12/18/2024	ClickBid
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$346.00	800 E. Ellis Rd STE 533
Expenditure from corporate funds	Norton Shores, MI 49441
8 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 Bank fees
	Dalik lees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
oxportantaro to sorione or o	
Date	Payee name
12/26/2024	ClickBid
Amount (\$)	Payee address; City; State; Zip Code
\$223.10	800 E. Ellis Rd STE 533
Expenditure from corporate funds	Norton Shores, MI 49441
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
	Bank fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/61	'
Date	Payee name
12/31/2024	ClickBid
Amount (\$)	Payee address; City; State; Zip Code
\$250.26	800 E. Ellis Rd STE 533
·	
Expenditure from corporate funds	Norton Shores, MI 49441
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Bank fees
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 Committee

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

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

oursement Solicitation/Fundraising Expense
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: 12/14 Rpt: 28/30	Denton County Republican Lincoln Cabinet 00087637
4 Date	5 Payee name
11/27/2024	Embassy Suites by Hilton Denton Convention Center
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25,000.00	3100 Town Center Trail
Expenditure from corporate funds	Denton, TX 76201
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 Hotel facility fee deposit for annual gala event
	Floter facility fee deposit for allitual gala event
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
12/17/2024	Hobby Lobby
Amount (\$)	Payee address; City; State; Zip Code
\$90.91	2217 S. Loop 288
·	<u>'</u>
Expenditure from corporate funds	Denton, TX 76205
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
	Frames for resolutions honoring elected officials whose terms ended 12/31/2024 given at reception.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/15/2024	Mackowiak, Matt
Amount (\$)	Payee address; City; State; Zip Code
\$150.00	807 Brazos St. STE 304
\$100.00	SOF BRAZES ON OFE SOF
Expenditure from corporate funds	Austin, TX 78701
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
	Speaker fee for speech at quarterly PAC member luncheon.
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/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: 13/14 Rpt: 29/30	Denton County Republican Lincoln Cabinet 00087637
4 Date	5 Payee name
12/30/2024	North Texas Print Solutions
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$370.81	2077 Switzer Rd
Expenditure from	
corporate funds	Sanger, TX 76266
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
	Check if Austin, TX, officeholder living expense Flyers to promote annual "Let Freedom Ring" dinner
	Tiyers to promote aimual Lett recubilitying uninel
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/31/2024	Point Bank
Amount (\$)	Payee address; City; State; Zip Code
\$7.00	200 S. Highway 377
Ψ1.00	200 S. Flighway STT
Expenditure from corporate funds	Pilot Point, TX 76258
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
	Bank fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/29/2024	Point Bank
Amount (\$)	Payee address; City; State; Zip Code
\$7.00	200 S. Highway 377
,	
Expenditure from corporate funds	Pilot Point, TX 76258
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.
LXI LIBITORE	Check if Austin, TX, officeholder living expense
	Bank fees
Complete ONLY if direct	Condidate/Officeholder name Office sought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
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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
Gitt/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (or for a content part listed above)

Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 14/14 Rpt: 30/30 Denton County Republican Lincoln Cabinet 00087637 4 Date Payee name 12/31/2024 Point Bank 6 Amount (\$) Payee address; City; State; Zip Code \$7.00 200 S. Highway 377 Expenditure from Pilot Point, TX 76258 corporate funds **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Bank fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/26/2024 Premiere Speakers Bureau Amount (\$) Payee address; City; State; Zip Code \$25,000.00 109 International Drive, Ste. 300 Expenditure from Franklin, TX 37064 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Speaker fee for Lara Trump as keynote speaker at the PAC's annual gala Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH