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. 46 00055130 3 COMMITTEE NAME **OFFICE USE ONLY** Nueces County Republican Executive Committee (CEC) Date Received **ELECTRONICALLY FILED** 01/14/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 5151 Flynn Pkwy Date Hand-delivered or Date Postmarked suite 103 Change of Address Corpus Christi, TX 78411 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Edward NAME NICKNAME LAST **SUFFIX** Bennett STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 6513 Miranda Dr. STREET **ADDRESS** (Residence or Business) Corpus Christi, TX 78414 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 5151 Flynn Parkway MAILING **ADDRESS** Ste. 103 Corpus Christi, TX 78411 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (956) 792-5534 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 Day Month Day Year 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**

FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Nueces County Republ	00055130			
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Michael Hunter Mayor Corpus Cl	nristi	
(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		
		Б. Оррозец		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOAN CONTRIBUTIONS	ZED POLITICAL CONTRIBUTIONS (OTHER THAN S, OR GUARANTEES OF LOANS, OR S MADE ELECTRONICALLY) Nort qualifies for the higher itemization threshold	\$	0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	18,437.35
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITION	CAL EXPENDITURES	\$	48,806.64
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT	L CONTRIBUTIONS MAINTAINED AS OF THE LAST ING PERIOD	DAY \$	79.00
OUTSTANDING LOAN TOTALS		AL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.		
		Mr. Edwa	rd Bennett	
		Signature of Ca		rer
AFFIX NOTARY	′ STAMP / SEAL ABOV		. 0	
Sworn to and subscribed	I before me, by the said	, th	nis the	day
of	_, 20, to certi	fy which, witness my hand and seal of office.		
Signature of officer ac	Iministering oath	Printed name of officer administering oath	Title of office	cer administering oath

FORM CEC ADDENDUM

Page 3 of 46

12 COMMITTEE NAME					13 Filer ID (Ethics Co	ommission Filers)
Nueces County Republica	n Executive Committ	ee (CEC)			00055130	
14 COMMITTEE ACTIVITY	A. Supported	Carolyn Vaughn	City Council At	-Large Corpus Christi		
(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.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Larry Elizondo	City Council At-I	Large Corpus Christi	
(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				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Jahvid Motahgi	City Council At-	-Large Corpus Christi	
(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					

FORM CEC ADDENDUM

Page 4 of 46

12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Nueces County Republica	1			00055130		
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Kaylynn Paxsor	City Council Dis	strict 4 Corpus	Christi
(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				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(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				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Gil Hernandez Corpus Christi	City Council Dist	trict 5	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Jerry Hooper S	Sheriff Corpus Ch	nristi	
	Assisted (Identify by name or, if		ochy Hooper c	onemi corpus ci		

FORM CEC ADDENDUM

Page 5 of 46

12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Nueces County Republica	n Executive Committ	ee (CEC)		00055130
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Brian Boone School Board Place	e 1 Tuloso-Midway ISD
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and	A. Supported		
	nature of issue.)	P. Opposed		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if			
	applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if	A. Supported	Republican	
	applicable, classify by party.)			
(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.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed	Ballot ID:Prop A Election Date:20 The issuance of bonds for desig renovating	024-11-05 Desc:Proposition A (Streets) ning, demolishing, constructing,
	3. Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)			

FORM CEC ADDENDUM

Page 6 of 46

12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Nueces County Republica	n Executive Committ	ee (CEC)		00055130
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed	Ballot ID:Prop B Election Date:20 and Recreation) The issuance of constructing	024-11-05 Desc:Proposition B (Parks f bonds for designing, demo,
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		024-11-05 Desc:Proposition D (Cultural ng Type A sales and use tax of 1/8 of
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	1	A. Supported		
(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		24-11-05 Desc:Proposition E (Streets - al & Community Facilities) Repurposing
	Officeholders Assisted (Identify by name or, if			
	applicable, classify by party.)			

FORM CEC ADDENDUM

		Page 7 of 46
12 COMMITTEE NAME		13 Filer ID (Ethics Commission Filers)
Nueces County Republican Executive Committ	ee (CEC)	00055130
14 COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
(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 Ballot ID:Prop C Election Date:20 Safety) The issuance of bonds for	024-11-05 Desc:Proposition C (Public or designing, demolishing,
Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed	
Measures (Describe by date and location of election and nature of issue.)	Wide	024-11-05 Desc:Proposition F (City- al Resiliency)Repurposing the expiring
	B. Opposed	
Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

SUBTOTALS - CEC COVER SHEET PG 3

				8 of 46
17 CC	MMITTI	(Ethics Commission Filers)		
Nu	ieces C			
		SUBTOTALS		SUBTOTAL AMOUNT
IN/A	ME OF	SCHEDULE		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 18,437.35
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		\$		
5.	Х	\$ 48,806.64		
6.		\$		
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	\$
				•

FORM CEC

	MONEI	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to	o complete this form	n.	1	Total pages Schedule A1: Sch: 1/21 Rpt: 9/46	
2	FILER NAME	FILER NAME				Filer ID (Ethics Commission	n Filers)
	Nueces Cou	nty Republican Executive Comn	nittee (CEC)			00055130	
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 11/01/2024 Adamson, Connor 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$26.34		
		Corpus Christi, TX 78414	· '				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
	Lawyer			Gault, Nye, & Quintana			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/01/2024	Adamson, Connor					\$26.34
		Contributor address; City; State	e; Zip Code				
		Corpus Christi, TX 78414					
		pation / Job title (See Instructions)		Employer (See Instructions	()		
	Lawyer			Gault, Nye, & Quintana			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/19/2024	Adamson, Craig					\$250.00
		Contributor address; City; State Corpus Christi, TX 78411	e; Zip Code				
	Dringinal occu	pation / Job title (See Instructions)	1	Employer (See Instructions	·/		
	•	ounding Partner		Adamson & Company C			
				ridamson a company c			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	ΦΕΩ ΩΩ
	11/14/2024	BRADFORD, REBECCA Contributor address; City; State	e; Zip Code				\$50.00
		Corpus Christi, TX 78414					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions	<u></u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/14/2024	BRADFORD, REBECCA					\$50.00
		Contributor address; City; State	e; Zip Code				
		Corpus Christi, TX 78414					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions	<u>.</u>		

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDULI	E A1
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 2/21 Rpt: 10/46	
2	FILER NAME	E				Filer ID (Ethics Commission	Filers)
	Nueces Cou	nty Republican Executive Cor	nmittee (CEC)			00055130	
4	Date 11/22/2024	5 Full name of contributor Ballenger, Kimberly6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$10.72
		Corpus Christi, TX 78414					
8	Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructions	<u>. </u>		
	Small Busine	ess Owner		Small Business Owner			
	Date 12/22/2024	Full name of contributor Ballenger, Kimberly Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$10.72
		Corpus Christi, TX 78414					
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Small Busine	ess Owner		Small Business Owner			
	Date 11/04/2024	Full name of contributor Calderone, Carmen Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$21.13
		Corpus Christi, TX 78414					
	Principal occu Analyzer Ted	pation / Job title (See Instructions chnician		Employer (See Instructions Flint Hills Resources	s)		
	Date 12/04/2024	Full name of contributor Calderone, Carmen Contributor address; City; St Corpus Christi, TX 78414	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$21.13
	Principal occu Analyzer Tec	pation / Job title (See Instructions chnician)	Employer (See Instructions Flint Hills Resources	5)		
	Date 11/05/2024	Full name of contributor Chapa, Debbie Contributor address; City; St Corpus Christi, TX 78402	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Retired Vete	pation / Job title (See Instructions		Employer (See Instructions	5)		

	MONEI	ARY POLITICAL CONTRIBU	JIIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete t	this form.	1	Total pages Schedule A1: Sch: 3/21 Rpt: 11/46	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Nueces Cou	nty Republican Executive Committee (CEC)		L	00055130	
4	Date 12/06/2024	 Full name of contributor	C (ID#:)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Corpus Christi, TX 78402 pation / Job title (See Instructions)	9 Employer (See Instructions) i)		
	Retired Vete					
	Date 10/30/2024	Full name of contributor out-of-state PAC Chesney, Brent Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$150.00
İ		Corpus Christi, TX 78411				
		pation / Job title (See Instructions)	Employer (See Instructions			
	CEO Attorne	y County Commissioner	First Title Company Nue	есе	s County	
	Date 11/17/2024	Full name of contributor out-of-state PAC Chesney, Brent Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$1,041.44
		Corpus Christi, TX 78412				
	Principal occu CEO/Genera	pation / Job title (See Instructions) Il Counsel	Employer (See Instructions First Title Company	5)		
	Date 11/25/2024	Full name of contributor out-of-state PAC Chesney, Brent Contributor address; City; State; Zip Code Corpus Christi, TX 78412	C (ID#:)		Amount of Contribution (\$)	\$1,041.44
	Principal occu CEO/Genera	pation / Job title (See Instructions) Il Counsel	Employer (See Instructions First Title Company	5)		
	Date 11/30/2024	Full name of contributor out-of-state PAC Chesney, Brent Contributor address; City; State; Zip Code Corpus Christi, TX 78411	C (ID#:)		Amount of Contribution (\$)	\$150.00
Г	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
		y/County Commissioner	First Title Company/ Nu	ece	es County	

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 4/21 Rpt: 12/46	
2	FILER NAME	nty Danubliaan Evacutiva Can	emittee (CEC)		3	Filer ID (Ethics Commission	n Filers)
		nty Republican Executive Con			L	00055130	
4	Date 12/02/2024	5 Full name of contributor Chesney, Brent6 Contributor address; City; States	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$520.87
		Corpus Christi, TX 78411					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	CEO/Genera	al Counsel		First Title Company			
	Date 12/12/2024	Full name of contributor Chesney, Brent Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$600.00
		Corpus Christi, TX 78412					
		pation / Job title (See Instructions))	Employer (See Instructions	5)		
	CEO/Genera	al Counsel		First Title Company			
	Date 12/30/2024	Full name of contributor Chesney, Brent Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$150.00
		Corpus Christi, TX 78411					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	CEO Attorne	y County Commissioner		First Title Company Nue	ece	s County	
	Date 11/12/2024	Full name of contributor Cron, Jenny Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$104.42
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Attorney			Porter, Rogers, Dahlma	n &	Gordon	
	Date 11/12/2024	Full name of contributor Cross, Kyle Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	:) 		
	Account Mar			Moody Price	·)		

The Instruction Guide explains how to complete this form. 1 Total pages Schedt. Sch: 5/21 Rpt: 13 2 FILER NAME Nueces County Republican Executive Committee (CEC) 3 Filer ID (Ethics Co. 00055130 4 Date 12/12/2024	HEDULE A1
Nueces County Republican Executive Committee (CEC) 4 Date	
4 Date 12/12/2024 5 Full name of contributor	ommission Filers)
8 Principal occupation / Job title (See Instructions) Account Manager Date Date DeVos, Krystal Contributor address; City; State; Zip Code Corpus Christi, TX 78410 Principal occupation / Job title (See Instructions) Engineer Date Full name of contributor Out-of-state PAC (ID#:	stion (\$) \$5.00
Account Manager Date Full name of contributor out-of-state PAC (ID#:) DeVos, Krystal Contributor address; City; State; Zip Code Corpus Christi, TX 78410 Principal occupation / Job title (See Instructions) Engineer Employer (See Instructions) American Electric Power Date Full name of contributor out-of-state PAC (ID#:) DeVos, Krystal Amount of Contributor Out-of-state PAC (ID#:) Amount of Contributor	
11/15/2024 DeVos, Krystal Contributor address; City; State; Zip Code Corpus Christi, TX 78410 Principal occupation / Job title (See Instructions) Engineer Employer (See Instructions) American Electric Power Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution 12/15/2024 DeVos, Krystal	
Principal occupation / Job title (See Instructions) Engineer Date Full name of contributor 12/15/2024 DeVos, Krystal Employer (See Instructions) American Electric Power Amount of Contribution	stion (\$) \$20.00
Engineer American Electric Power Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribute 12/15/2024 DeVos, Krystal	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution 12/15/2024 DeVos, Krystal	
1	s20.00
Corpus Christi, TX 78410 Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Engineer American Electric Power	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution 11/05/2024 Deane, Kristina Contributor address; City; State; Zip Code	s14.89
Corpus Christi, TX 78404 Principal occupation / Job title (See Instructions) Realtor Employer (See Instructions) Self employed Realtor	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution 12/05/2024 Deane, Kristina Contributor address; City; State; Zip Code Corpus Christi, TX 78404	stion (\$) \$14.89
Principal occupation / Job title (See Instructions) Employer (See Instructions) Self-amplexed Realter	
Realtor Self employed Realtor	

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDULE	■ A1
	The Instru	ction Guide explains how to complete this fo	or	m.	1	Total pages Schedule A1: Sch: 6/21 Rpt: 14/46	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)			3	Filer ID (Ethics Commission 00055130	Filers)
4	Date 11/21/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$10.72
8	Principal occu	Corpus Christi, TX 78412 pation / Job title (See Instructions)	a	Employer (See Instructions	;) 		
0	Self	pation / Job title (See instructions)	9	TNT health	»)		
	Date 12/21/2024	Full name of contributor out-of-state PAC (ID#:_ DiMarzo, Mike Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$10.72
	Principal occu	Corpus Christi, TX 78412 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	Self	sation, oop title (occ manachons)		TNT health	,,		
	Date 11/10/2024	Full name of contributor out-of-state PAC (ID#:_Farrar, Randy Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.00
		Corpus Christi, TX 78413					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_Farrar, Randy Contributor address; City; State; Zip Code Corpus Christi, TX 78413				Amount of Contribution (\$)	\$5.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/17/2024	Full name of contributor out-of-state PAC (ID#:_Flanagan, Shawn Contributor address; City; State; Zip Code Corpus Christi, TX 78411				Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			<u> </u>				

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUL	E A1	
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/21 Rpt: 15/46	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)		3	Filer ID (Ethics Commission 00055130	n Filers)
4	Date 12/17/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$10.00
_	5	Corpus Christi, TX 78411		<u></u>		
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/12/2024	Full name of contributor out-of-state PAC (ID#:_ Fryer, Samuel Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$208.54
	Dringinal occu	Corpus Christi, TX 78468 pation / Job title (See Instructions)	Employer (See Instructions	·/-		
	•	rmation Administrator	Employer (See Instructions Department of the Army			
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Fryer, Samuel Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$26.34
		Corpus Christi, TX 78468				
	•	pation / Job title (See Instructions) rmation Administrator	Employer (See Instructions Corpus Christi Army De			
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Fryer, Samuel Contributor address; City; State; Zip Code Corpus Christi, TX 78468			Amount of Contribution (\$)	\$26.34
	•	pation / Job title (See Instructions) rmation Administrator	Employer (See Instructions Corpus Christi Army De			
	Date 11/12/2024	Full name of contributor out-of-state PAC (ID#:_Garner, Barbara Contributor address; City; State; Zip Code Corpus Christi, TX 78411)		Amount of Contribution (\$)	\$26.34
	Principal occu End of Life D	pation / Job title (See Instructions) Diula	Employer (See Instructions Self	5)		

	MONET	ARY POLITICAL CONTRIB	BUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to complet	e this forr	n.	1	Total pages Schedule A1: Sch: 8/21 Rpt: 16/46	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC))		3	Filer ID (Ethics Commission 00055130	n Filers)
4	Date 12/12/2024	 Full name of contributor out-of-state F Garner, Barbara Contributor address; City; State; Zip Code 	PAC (ID#:)	7	Amount of Contribution (\$)	\$26.34
_	Deinsinal assu	Corpus Christi, TX 78411	lo.	Franks von (Cooks brothe stiere			
8	End of Life D	pation / Job title (See Instructions) viula	9	Employer (See Instructions Self	5)		
	Date 11/23/2024	Full name of contributor out-of-state F Gassman, Edward Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Corpus Christi, TX 78418					
	Principal occu Contractor	pation / Job title (See Instructions)		Employer (See Instructions Fast Eddies Delivery	5)		
	Date 12/23/2024	Full name of contributor out-of-state F Gassman, Edward Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Corpus Christi, TX 78418					
	Principal occu Contractor	pation / Job title (See Instructions)		Employer (See Instructions Fast Eddies Dekivery	s)		
	Date 11/19/2024	Full name of contributor out-of-state F Graves, Nancy Contributor address; City; State; Zip Code Corpus Christi, TX 78411				Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/18/2024	Full name of contributor out-of-state F Guggenheim, Alan Contributor address; City; State; Zip Code Corpus Christi, TX 78418				Amount of Contribution (\$)	\$50.00
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUTIO	N	IS		SCHEDULE	A1
	The Instruc	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 9/21 Rpt: 17/46	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)			3	Filer ID (Ethics Commission 00055130	Filers)
4	Date 12/18/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$50.00
0	Dringing aggu	Corpus Christi, TX 78418 pation / Job title (See Instructions)	_	Employer (See Instruction	<u> </u>		
8	CEO	oalion7 Job title (See instructions)	9	Employer (See Instructions Retired	»)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Guggenheim, Suzanne Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$26.34
	Delicalization	Corpus Christi, TX 78418		Fanda an (Carlos Instructions			
	Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Guggenheim, Suzanne Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$26.34
		Corpus Christi, TX 78418					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 11/17/2024	Full name of contributor out-of-state PAC (ID#:_Holland, Glenn Contributor address; City; State; Zip Code Corpus Christi, TX 78414			•	Amount of Contribution (\$)	\$26.34
	Principal occu Lead Pastor	pation / Job title (See Instructions)		Employer (See Instructions The Net Fellowship Chu		1	
	Date 12/17/2024	Full name of contributor out-of-state PAC (ID#:_Holland, Glenn Contributor address; City; State; Zip Code Corpus Christi, TX 78414				Amount of Contribution (\$)	\$26.34
	Principal occu Lead Pastor	pation / Job title (See Instructions)		Employer (See Instructions The Net Fellowship Chu		1	
	Lead I doll			The Net I chowship Office		<u>'</u>	

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A		
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/21 Rpt: 18/46	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)		3	Filer ID (Ethics Commission 00055130	n Filers)
4	Date 11/19/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
•	Dringing Loon	Corpus Christi, TX 78412	D. Employer (Co.) Instructions			
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/06/2024	Full name of contributor out-of-state PAC (ID#:_ Hovda, Deborah Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Corpus Christi, TX 78409 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	pation / Job title (See Instructions)	Employer (See instructions	')		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Hovda, Deborah Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Corpus Christi, TX 78409				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 11/10/2024	Full name of contributor out-of-state PAC (ID#:_ Hunter, Michael Contributor address; City; State; Zip Code Corpus Christi, TX 78412			Amount of Contribution (\$)	\$52.37
	Principal occu Consultant	pation / Job title (See Instructions)	Employer (See Instructions EH Consulting)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Hunter, Michael Contributor address; City; State; Zip Code Corpus Christi, TX 78412			Amount of Contribution (\$)	\$52.37
	Principal occu Consultant	pation / Job title (See Instructions)	Employer (See Instructions EH Consulting	5)		

	MONET	ARY POLITICAL CONTRIB	UTIONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete	e this form.	1 Total pages Schedule A1: Sch: 11/21 Rpt: 19/46			
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)		3 Filer ID (Ethics Commission Filers) 00055130			
4	Date 11/07/2024	 Full name of contributor		7 Amount of Contribution (\$) \$15.93			
		CORPUS CHRISTI, TX 78418					
8	Principal occu Retired	oation / Job title (See Instructions)	9 Employer (See Instructions	ons)			
	Date 12/07/2024	Full name of contributor out-of-state PA Jernegan, Barbara Contributor address; City; State; Zip Code	AC (ID#:)	Amount of Contribution (\$)			
	Principal occu	CORPUS CHRISTI, TX 78418 pation / Job title (See Instructions)	Employer (See Instruction:	ons)			
	Retired	,		,			
	Date 11/17/2024	Full name of contributor out-of-state PAL Lamb, Susan Contributor address; City; State; Zip Code	AC (ID#:)	Amount of Contribution (\$) \$20.24			
		Corpus Christi, TX 78401					
		pation / Job title (See Instructions) ement and PCT 16	Employer (See Instruction: Self	ons)			
	Date 12/17/2024	Full name of contributor out-of-state PAL Lamb, Susan Contributor address; City; State; Zip Code Corpus Christi, TX 78401	AC (ID#:)	Amount of Contribution (\$) \$20.24			
	•	pation / Job title (See Instructions) ement and PCT 16	Employer (See Instruction: Self	ons)			
	Date 11/23/2024	Full name of contributor out-of-state PAL Lancaster, Mary Contributor address; City; State; Zip Code Corpus Christi, TX 78415	AC (ID#:)	Amount of Contribution (\$) \$10.00			
	Principal occu Server	oation / Job title (See Instructions)	Employer (See Instructions	ons)			
			1				

	MONEI	ARY POLITICAL CON	SCHEDULE A1				
	The Instruc	ction Guide explains how to co	omplete this fo	rm.	1	Total pages Schedule A1: Sch: 12/21 Rpt: 20/46	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Nueces Cou	nty Republican Executive Committee	e (CEC)			00055130	
4	Date 12/19/2024	 Full name of contributor out Lancaster, Mary Contributor address; City; State; Zip 	-of-state PAC (ID#:) Code		7	Amount of Contribution (\$)	\$10.00
		Corpus Christi, TX 78415					
8	Principal occu Care Giver	pation / Job title (See Instructions)	Ş	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out	-of-state PAC (ID#:			Amount of Contribution (\$)	\$150.00
		Contributor address; City; State; Zip) Code				
		Corpus Christi, TX 78401					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/15/2024	Full name of contributor out Locke, Heather	-of-state PAC (ID#:			Amount of Contribution (\$)	\$150.00
		Corpus Christi, TX 79401) Code				
	Dringing conu	Corpus Christi, TX 78401 pation / Job title (See Instructions)		Employer (See Instructions			
	Retired	· · · · · · · · · · · · · · · · · · ·		Employer (See Instructions	,		
	Date 11/15/2024	Full name of contributor out Magill, Chad Contributor address; City; State; Zip	-of-state PAC (ID#:) Code			Amount of Contribution (\$)	\$25.00
		Corpus Christi, TX 78414					
	•	pation / Job title (See Instructions) usiness Development		Employer (See Instructions Buchanan Title)		
	Date 12/15/2024	Full name of contributor out	-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Contributor address; City; State; Zip Corpus Christi, TX 78414) Code				
		pation / Job title (See Instructions)		Employer (See Instructions)		
	Director of B	usiness Development		Buchanan Title			

	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 13/21 Rpt: 21/46		
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)		3	Filer ID (Ethics Commission 00055130	n Filers)	
4	Date 11/10/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00	
_		Corpus Christi, TX 78410					
8	Principal occur Retired	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#: Milby, Laura Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
	Deinsinal assu	Corpus Christi, TX 78410	Franklavar (Caa laatuvatiara				
	Retired	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00	
		Corpus Christi, TX 78410					
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/21/2024	Full name of contributor out-of-state PAC (ID#:Milby, Richard Contributor address; City; State; Zip Code Corpus Christi, TX 78410)		Amount of Contribution (\$)	\$100.00	
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 11/11/2024	Full name of contributor out-of-state PAC (ID#:_ Moore, Carrie Contributor address; City; State; Zip Code Corpus Christi, TX 78411)		Amount of Contribution (\$)	\$5.52	
	Principal occu Unemployed	pation / Job title (See Instructions)	Employer (See Instructions)			
		<u>'</u>					

	MONET	ARY POLITICAL CONTRIBUTI	ON	NS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 14/21 Rpt: 22/46	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)			3	Filer ID (Ethics Commission 00055130	Filers)
4	Date 12/11/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$5.52
_		Corpus Christi, TX 78411			<u></u>		
8	Principal occu Pedo Hunter	pation / Job title (See Instructions)	9	Employer (See Instructions None- Please Hire Me	5)		
	Date 11/11/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$26.34
	Principal occu	Corpus Christi, TX 78415 pation / Job title (See Instructions)	\top	Employer (See Instructions	<u> </u> s)		
	Owner	, ,		Self Employed	,		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID# Motaghi, Jahvid Contributor address; City; State; Zip Code	#:			Amount of Contribution (\$)	\$26.34
		Corpus Christi, TX 78415					
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	s)		
	Date 11/17/2024	Full name of contributor out-of-state PAC (ID) Olsson, Natalie Contributor address; City; State; Zip Code Corpus Christi, TX 78413)	•	Amount of Contribution (\$)	\$5.52
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/17/2024	Full name of contributor out-of-state PAC (ID# Olsson, Natalie Contributor address; City; State; Zip Code Corpus Christi, TX 78413				Amount of Contribution (\$)	\$5.52
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	s)		
			•				

	MONET	ARY POLITICAL CONTRIBUTI	ON	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 15/21 Rpt: 23/46	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)			3	Filer ID (Ethics Commission 00055130	n Filers)
4	Date 11/26/2024	 Full name of contributor out-of-state PAC (IDF Ramos-Figueroa, Roberto Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$52.37
8	Principal occur	Corpus Christi, TX 78414 pation / Job title (See Instructions)	l _a	Employer (See Instructions	;) 		
0	Aircraft Exan		ľ	Department of the ARM			
	Date 12/25/2024	Full name of contributor out-of-state PAC (ID#Ramos-Figueroa, Roberto Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$52.37
	Delevie et e e e e	Corpus Christi, TX 78414	_	Formlesson (October Instruction	<u> </u>		
	Aircraft Exan	pation / Job title (See Instructions) niner		Employer (See Instructions Department of the ARM			
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID# Rickertsen, William Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$520.87
	Principal occu	Corpus Christi, TX 78418 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> S)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID# Rickertsen, William Contributor address; City; State; Zip Code Corpus Christi, TX 78418)		Amount of Contribution (\$)	\$520.87
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (IDF Robert, Marianne Contributor address; City; State; Zip Code Corpus Christi, TX 78414	#:			Amount of Contribution (\$)	\$5.52
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	NS		SCHEDULI	E A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 16/21 Rpt: 24/46	
2	FILER NAME Nueces Cou	nty Republican Executive Cor	nmittee (CEC)		3	Filer ID (Ethics Commission 00055130	Filers)
4	Date 12/19/2024	5 Full name of contributor Robert, Marianne	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$5.52
		Corpus Christi, TX 78414					
8	Principal occu Retired	pation / Job title (See Instructions	(9)	9 Employer (See Instructions	s)		
	Date 11/05/2024	Full name of contributor Roy, Everett Contributor address; City; St				Amount of Contribution (\$)	\$26.34
	Principal occu	Corpus Christi, TX 78410 pation / Job title (See Instructions	s)	Employer (See Instructions	<u>s)</u>		
	Market Presi		,	National Bank & Trust	-,		
	Date 12/06/2024	Full name of contributor Roy, Everett Contributor address; City; St)		Amount of Contribution (\$)	\$26.34
		Corpus Christi, TX 78410					
	Principal occu Market Presi	pation / Job title (See Instructions dent	5)	Employer (See Instructions National Bank & Trust	5)		
	Date 11/11/2024	Full name of contributor Sales, James Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$21.13
	Principal occu Attorney	pation / Job title (See Instructions	5)	Employer (See Instructions 36th District Attorney's 0		ce	
	Date 12/11/2024	Full name of contributor Sales, James Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$21.13
	Principal occu Attorney	pation / Job title (See Instructions	5)	Employer (See Instructions 36th District Attorney's		ce	
	<u> </u>		I	·			

	MONET	ARY POLITICAL CONTRIBUTION	Λ	IS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 17/21 Rpt: 25/46	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)			3	Filer ID (Ethics Commission 00055130	Filers)
4	Date 11/09/2024	 Full name of contributor out-of-state PAC (ID#: Schwing, Larry Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$26.34
0	Principal occur	Corpus Christi, TX 78413 pation / Job title (See Instructions)	۱۵	Employor (Soo Instructions	<u>''</u>		
0	Medicare Sa		9	Employer (See Instructions Self	·)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_Schwing, Larry Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$26.34
	Dringing aggr	Corpus Christi, TX 78413	_	Employer (See Instructions	<u>''</u>		
	Medicare Sa	pation / Job title (See Instructions) les		Employer (See Instructions Self	>)		
	Date 11/18/2024	Full name of contributor out-of-state PAC (ID#:_ Sexton, Teri Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
		Corpus Christi, TX 78412					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 12/18/2024	Full name of contributor out-of-state PAC (ID#:_ Sexton, Teri Contributor address; City; State; Zip Code Corpus Christi, TX 78412			•	Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:_Sims, Orlando Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414				Amount of Contribution (\$)	\$10.00
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	s)		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 18/21 Rpt: 26/46		
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)			3	Filer ID (Ethics Commission Filers) 00055130		
4	Date 12/01/2024			7	Amount of Contribution (\$) \$10.00			
8	Principal occu	CORPUS CHRISTI, TX 78414 pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	-, 			
	Consultant	sation / 300 title (See Instructions)		Self Employed	·)			
	Date 12/03/2024	Full name of contributor uut-of-state PAC (ID#: Steve Ray Associates LLC Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$2,800.00		
	Dringing! goog	Corpus Christi, TX 78403 pation / Job title (See Instructions)		Employer (See Instructions	·/_			
	Fillicipal occu	oalion7 300 title (See Instructions)		Employer (See instructions	·)			
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:Stokes, Sandra and Dee Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$25.00		
		Corpus Christi, TX 78410		- 100	<u> </u>			
	Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Date 12/21/2024	Full name of contributor out-of-state PAC (ID#: Stokes, Sandra and Dee Contributor address; City; State; Zip Code Corpus Christi, TX 78410)		Amount of Contribution (\$) \$25.00		
Principal occupation / Job title (See Instructions) Retired Employer (See Instructions)			;)					
	Date 10/30/2024	Full name of contributor out-of-state PAC (ID#:_Suarez, Jesse Contributor address; City; State; Zip Code Corpus Christi, TX 78415)		Amount of Contribution (\$) \$47.16		
	Principal occu Electrician	pation / Job title (See Instructions)		Employer (See Instructions Rabalais I & E Construc		s		
				. Casardo I & E Constitu		<u> </u>		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 19/21 Rpt: 27/46	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)			3	Filer ID (Ethics Commission 00055130	on Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Suarez, Jesse 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$47.16		
		Corpus Christi, TX 78415					
8	Principal occu Electrician	pation / Job title (See Instructions)	9	Employer (See Instructions Rabalais I & E Construc		S	
	Date 12/30/2024	Full name of contributor out-of-state PAC (ID#:_ Suarez, Jesse Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$47.16
	Deinainal assu	Corpus Christi, TX 78415					
			Employer (See Instructions Rabalais I & E Construc		S		
	Date 11/22/2024	Full name of contributor out-of-state PAC (ID#:_Sullivan, Susie Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.72
		Corpus Christi, TX 78413					
	Principal occu CPA	pation / Job title (See Instructions)		Employer (See Instructions Branscomb Law	5)		
	Date 12/22/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.72
Corpus Christi, TX 78413 Principal occupation / Job title (See Instructions) CPA Employer (See Instructions) Branscomb Law		Employer (See Instructions Branscomb Law	<u> </u>				
	Date Full name of contributor out-of-state PAC (ID#:) 11/01/2024 Todd Hunter Campaign Contributor address; City; State; Zip Code Corpus Christi, TX 78412			Amount of Contribution (\$)	\$3,000.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 20/21 Rpt: 28/46		
2	FILER NAME Nueces Cou	nty Republican Executive Committe	e (CEC)		3	Filer ID (Ethics Commission 00055130	on Filers)	
4	Date 11/19/2024	 Full name of contributor our Todd Hunter Campaign Contributor address; City; State; Zip 	t-of-state PAC (ID#: p Code)	7	Amount of Contribution (\$)	\$500.00	
_	Deignigal	Corpus Christi, TX 78412	lo-	Frankrijer (Coo koete jetinge				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)			
	Date 12/03/2024	Full name of contributor our Todd Hunter Campaign Contributor address; City; State; Zip				Amount of Contribution (\$)	\$4,000.00	
	Corpus Christi, TX 78412							
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)			
	Date 11/01/2024	Full name of contributor our Webber, Tonya Contributor address; City; State; Zip	t-of-state PAC (ID#: p Code			Amount of Contribution (\$)	\$25.00	
		Corpus Christi, TX 78414						
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Porter Rogers)			
	Date 11/13/2024	Whiteside, Jason	t-of-state PAC (ID#: p Code			Amount of Contribution (\$)	\$52.37	
	Principal occu Estimator	pation / Job title (See Instructions)		Employer (See Instructions Pro Tech Mechanical)			
	Date 12/13/2024	Full name of contributor our Whiteside, Jason Contributor address; City; State; Zip Corpus Christi, TX 78411	t-of-state PAC (ID#:)		Amount of Contribution (\$)	\$52.37	
	Principal occu Estimator	pation / Job title (See Instructions)		Employer (See Instructions Pro Tech Mechanical)			

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 21/21 Rpt: 29/46		
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)		3	Filer ID (Ethics Commission 00055130	Filers)
4	Date 11/25/2024			7	Amount of Contribution (\$)	\$26.34
8	Principal occu	Corpus Christi, TX 78411 pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Contractor Designer Date 12/25/2024 Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$26.34	
	Principal occupation / Job title (See Instructions) Contractor Designer Employer (See Instructions) Self Employed			i)		
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$25.00
	Deignaignal	CORPUS CHRISTI, TX 78414	Franklauser (Coo laneturetti no			
	CPA	pation / Job title (See Instructions)	Employer (See Instructions Self Employed	5)		
	Date Full name of contributor out-of-state PAC (ID#:_ 12/10/2024 bennett, edward Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414				Amount of Contribution (\$)	\$25.00
	Principal occupation / Job title (See Instructions) CPA Employer (See Instruction Ed Bennett			5)		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

ursement Solicitation/Fundraising Expense
Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of 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: 1/17 Rpt: 30/46	Nueces County Republican Executive Committee (CEC) 00055130
4	Date	5 Payee name
	11/04/2024	Adobe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$49.78	345 Park Avenue
		San Jose, CA 95110
8	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
		Software Licenses
		Soliware Electroces
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	11/19/2024	Adobe
_	Amount (\$)	Payee address; City; State; Zip Code
	\$21.64	345 Park Avenue
	Ψ21.04	5-10 T WIN WORLD
		San Jose, CA 95110
	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 Software Licenses
		Solitiva de Electrodo
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
-	Date	Payee name
	12/02/2024	Adobe
	Amount (\$)	Payee address; City; State; Zip Code
	\$49.78	345 Park Avenue
	Ψ-3.70	5.5. a.i., world
		San Jose, CA 95110
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	ZA ZHOHORZ	Check if Austin, TX, officeholder living expense
		Software Licenses
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il 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: 2/17 Rpt: 31/46	Nueces County Republican Executive Committee (CEC) 00055130
4	Date	5 Payee name
	12/19/2024	Adobe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$21.64	345 Park Avenue
		San Jose, CA 95110
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 Software Licenses
		Software Licenses
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
⊨	Data	
	Date	Payee name
	11/07/2024	Butler, Josh
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	5742 Westlake Dr
		Sandia, TX 78383
	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 Digital Advertising GOTV
		Digital Advertising GOTV
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨	Date	
	Date	Payee name
	12/24/2024	CVS Pharmacy
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.00	7442 S Staples
		Corpus Christi, TX 78413
	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 Office supplies
		Office supplies
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
L		
1		
l		

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 pages Cabadula E4:	
1	Total pages Schedule F1: Sch: 3/17 Rpt: 32/46	2 FILER NAME Nueces County Republican Executive Committee (CEC) 3 Filer ID (Ethics Commission Filers) 00055130
4	Date	5 Payee name
	11/06/2024	Dreamers and Walkers Consulting
6	Amount (\$) \$1,100.00	7 Payee address; City; State; Zip Code PO Box 18639 Corpus Christi, TX 78480
8	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 Digital Advertising GOTV
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/28/2024	Gaglers
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 2093 Philadelphia Pike #7468 Claymont, DE 19703
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense Phone Banking Software for Political Calling for candidates to use
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/29/2024	Gaglers
	Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 2093 Philadelphia Pike #7468 Claymont, DE 19703
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		☐ Check if Austin, TX, officeholder living expense Phone Banking Software for Political Calling for candidates to use
	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 M 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	
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/17 Rpt: 33/46	Nueces County Republican Executive Committee (CEC) 00055130
4	Date	5 Payee name
	10/30/2024	Gaglers
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	2093 Philadelphia Pike
		#7468
		Claymont, DE 19703
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Phone Banking Software for Political Calling for candidates to use
_	Complete ONLY if alice at	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held I
-	Date	Payee name
	11/04/2024	Gaglers
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	2093 Philadelphia Pike
	ŕ	#7468
		Claymont, DE 19703
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Phone Banking Software for Political Calling for
		candidates to use
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	•	
	Date	Payee name
	11/05/2024	Gaglers
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	2093 Philadelphia Pike
		#7468
L		Claymont, DE 19703
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Phone Banking Software for Political Calling for
		candidates to use
	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 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	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: 5/17 Rpt: 34/46	2 FILER NAME Nueces County Republican Executive Committee (CEC) 3 Filer ID (Ethics Commission Filers) 00055130
4	Date	5 Payee name
	11/06/2024	Gaglers
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,500.00	2093 Philadelphia Pike
		#7468
		Claymont, DE 19703
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense Phone Banking Software for Political Calling for
		candidates to use
_	Complete ONLY if direct	Candidate/Officeholder page Office acuth
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/16/2024	Gaglers
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	2093 Philadelphia Pike
		#7468
		Claymont, DE 19703
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Phone Banking Software for Political Calling for
		candidates to use
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/16/2024	Gaglers
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	2093 Philadelphia Pike
		#7468
		Claymont, DE 19703
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Solicitation/Fundraising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Phone Banking Software for Political Calling for candidates to use
_	Operation Objects "	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
l		

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

	Contributions/ Donations Made By 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: 6/17 Rpt: 35/46	Nueces County Republican Executive Committee (CEC) 00055130
4	Date	5 Payee name
	12/19/2024	GoFundMe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,010.00	855 Jefferson Ave
		Redwood City, CA 94063
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Chris Dorr support home fire
		Chris Dorr support home fire
Ļ	Complete ONLY if alice -t	Condidate/Officeholder name Office cought
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_	<u> </u>	
	Date	Payee name
	12/09/2024	Gomez, Kayley
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	5151 Flynn Parkway
		Corpus Christi, TX 78411
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	_/	Check if Austin, TX, officeholder living expense
		Phone Banking GOTV
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
_	Data	David david
	Date 12/16/2024	Payee name
		Gomez, Kayley
	Amount (\$)	Payee address; City; State; Zip Code
	\$780.00	5151 Flynn Parkway
		Corpus Christi, TX 78411
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Phone Banking GOTV
	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

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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/17 Rpt: 36/46	Nueces County Republican Executive Committee (CEC) 00055130
4 Date	5 Payee name
12/09/2024	Gomez, Kayley
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$270.00	5151 Flynn Parkway
	Corpus Christi, TX 78411
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Phone Banking GOTV
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experiorale to belief C/O	
Date	Payee name
10/30/2024	Grunwald Printing Co.
Amount (\$)	Payee address; City; State; Zip Code
\$1,190.75	PO Box 3219
	Corpus Christi, TX 78404
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense
LAFLINDITUKE	Check if Austin, TX, officeholder living expense
	4x4 Signs
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experialitie to beliefft C/O	
Date	Payee name
10/31/2024	Grunwald Printing Co.
Amount (\$)	Payee address; City; State; Zip Code
\$3,745.55	PO Box 3219
	Corpus Christi, TX 78404
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense
LA LIBITORE	Check if Austin, TX, officeholder living expense
	2nd Mailer
Complete ONL V 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
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/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: 8/17 Rpt: 37/46	Nueces County Republican Executive Committee (CEC) 00055130
4	Date	5 Payee name
	11/05/2024	Grunwald Printing Co.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,697.88	PO Box 3219
		Corpus Christi, TX 78404
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense 4x4 Signs
		in a signo
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	12/19/2024	Hammond, William
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	7901 Williams Dr
		Apt 6902
		Corpus Christi, TX 78413
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Phone Banking GOTV
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit Gree	
	Date	Payee name
	11/14/2024	Holiday Inn Coprus Christi Conf Ctr
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,773.36	5549 Leopard
		Corpus Christi, TX 78408
	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
		Conference Grassroots Training
		Somerense Stassions Training
H	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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Il 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: 9/17 Rpt: 38/46	Nueces County Republican Executive Committee (CEC) 00055130								
4	Date	5 Payee name								
	11/18/2024	Holiday Inn Coprus Christi Conf Ctr								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$1,000.00	5549 Leopard								
		Corpus Christi, TX 78408								
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 Conference Grassroots Training								
		Conference Grassroots Training								
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
ľ	expenditure to benefit C/OI	the state of the s								
F	Date	Payee name								
	11/18/2024	Holiday Inn Coprus Christi Conf Ctr								
Н	Amount (\$)	Payee address; City; State; Zip Code								
	\$2,000.00	5549 Leopard								
	·									
		Corpus Christi, TX 78408								
	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								
		Conference Grassroots Training								
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OH									
H	Date	Payee name								
	11/20/2024	Holiday Inn Coprus Christi Conf Ctr								
H	Amount (\$)	Payee address; City; State; Zip Code								
	\$1,113.83	5549 Leopard								
	Ψ1,110.00	3545 Leopard								
		Corpus Christi, TX 78408								
Н	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
l	OF EXPENDITURE	Event Expense								
	EXPENDITURE	Check if Austin, TX, officeholder living expense								
		Conference Grassroots Training								
L	Operated Children	Openhild to 100% and believe a second of the								
1	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held								
\vdash										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 10/17 Rpt: 39/46	Nueces County Republican Executive Committee (CEC) 00055130								
4	Date	5 Payee name								
	11/18/2024	IRS								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$375.43	USA TAXPMT Online								
		P.O. Box 1214								
		Charlotte, NC 28201-1214								
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 Federal Taxes								
		reuciai raxes								
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
9	Complete ONLY if direct expenditure to benefit C/O	the state of the s								
	Date	Payee name								
	12/17/2024	IRS								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$123.14	USA TAXPMT Online								
	P.O. Box 1214									
		Charlotte, NC 28201-1214								
	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 Federal Taxes								
	reuerai raxes									
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									
L	experiordine to berieff C/O									
	Date	Payee name								
	11/20/2024	Intuit								
Г	Amount (\$)	Payee address; City; State; Zip Code								
	\$128.99	2700 Coast Ave								
		Mountain View, CA 94043								
	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 Quickbooks Payment Fees								
Quickbooks Payment 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 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: 11/17 Rpt: 40/46	Nueces County Republican Executive Committee (CEC) 00055130									
4	Date	5 Payee name									
	12/20/2024	Intuit									
6	Amount (\$)	7 Payee address; City; State; Zip Code									
	\$128.99	2700 Coast Ave									
		Mountain View, CA 94043									
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									
		Quickbooks Payment Fees									
_	Opening the ONLY if allowed	Open Highest Office health and a second to the second to t									
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held									
	Date	Payee name									
	11/07/2024	Joe's Crab Shack									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$813.04	444 N Shoreline									
		Corpus Christi, TX 78404									
	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.									
	EXI ENDITORE	Check if Austin, TX, officeholder living expense									
		General Election Watch Party									
	Complete ONLY if direct	Candidata/Officeholder name Office county Office hold									
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH										
	· 										
	Date	Payee name									
	11/14/2024	MICROSOFT INC									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$19.19	1 MICROSOFT WAY									
		REDMOND, WA 98052									
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description									
	OF EXPENDITURE	Office Overhead/Rental Expense									
	EXPENDITORE	Check if Austin, TX, officeholder living expense									
		Software Licenses									
	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 Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/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: 12/17 Rpt: 41/46	Nueces County Republican Executive Committee (CEC) 00055130							
4	Date	5 Payee name							
	11/14/2024	MICROSOFT INC							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$27.06	1 MICROSOFT WAY							
		REDMOND, WA 98052							
8	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							
		Software Licenses							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OF								
_	Date	Payee name							
	12/09/2024	MICROSOFT INC							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$27.06	1 MICROSOFT WAY							
Ψ21.00 I WICKOSOFT WAT									
	REDMOND, WA 98052								
	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							
		Software Licenses							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OH								
	Date	Payee name							
	12/16/2024	MICROSOFT INC							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$19.19	1 MICROSOFT WAY							
	420.20								
		REDMOND, WA 98052							
	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.							
	EXI ENDITORE	Check if Austin, TX, officeholder living expense Software Licenses							
		Software Licenses							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	Complete ONLY if direct expenditure to benefit C/OH								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

1g 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

mbursement Solicitation/Fundraising Expense
tal 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: 13/17 Rpt: 42/46	Nueces County Republican Executive Committee (CEC) 00055130								
4	Date	5 Payee name								
	11/08/2024	NationBuilder								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$359.00	PO Box 811428								
		Los Angeles, CA 90081								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Solicitation/Fundraising Expense								
		CRM software								
		CRW Suitware								
_	Compulate ONII V if direct	Candidate/Officeholder name Office sought Office held								
9	Complete ONLY if direct expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·								
	Date	Payee name								
	12/09/2024	NationBuilder								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$478.00	PO Box 811428								
		Los Angeles, CA 90081								
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.								
		CRM software								
		Craw sollware								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/O									
	Data									
	Date 11/04/2024	Payee name OOMA INC								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$30.93	1880 EMBARCADERO ROAD								
		PALO ALTO, CA 94303								
	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 Telephone Services								
		i eleptione Services								
\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 -

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	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: 14/17 Rpt: 43/46	Nueces County Republican Executive Committee (CEC) 00055130								
4	Date	5 Payee name								
	12/03/2024	OOMA INC								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$31.11	1880 EMBARCADERO ROAD								
		PALO ALTO, CA 94303								
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								
		Telephone Services								
Ļ	Occupation Children	Overdidate (Office helder over a community of the communi								
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	11/18/2024	Olguin, Hilda								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$1,964.75	\$1,964.75 14206 Bowman Ct								
		Robstown, TX 78318								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITORE	Check if Austin, TX, officeholder living expense								
		October Monthly Pay								
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH										
L	experialitate to beliefit C/OI	<u> </u>								
	Date	Payee name								
L	12/17/2024	Olguin, Hilda								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$804.90	14206 Bowman Ct								
		Robstown, TX 78318								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Salaries/Wages/Contract Labor								
	EXPENDITURE	Check if Austin, TX, officeholder living expense								
		November Monthly Pay								
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held								
	experiorale to belieff 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

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

	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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 15/17 Rpt: 44/46	Nueces County Republican Executive Committee (CEC) 00055130						
4	Date	5 Payee name						
	11/13/2024	Olsson, Natalie						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$394.04	4518 Hogan Dr						
		Corpus Christi, TX 78413						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense Reimbursement Sign Stakes						
		Reimbursement Sign Stakes						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
9	expenditure to benefit C/OI							
\vdash	Date	Payee name						
	10/28/2024	Republican Party of Texas						
	Amount (\$)	Payee address; City; State; Zip Code PO Box 2206						
	\$3,000.00	PO B0x 2206						
		Austin, TX 78768						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense						
		Candidate/Officeholder/Political Committee						
		Boiledon by 626 to 14. 1						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OH							
_	Date	Payee name						
	12/02/2024	Republican Party of Texas						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$8,200.00	PO Box 2206						
	Ψ0,200.00	1 0 BOX 2230						
		Austin, TX 78768						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Candidate/Officeholder/Political Committee						
		Donation by CEC to RPT						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
L	expenditure to benefit C/OI	п						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/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: 16/17 Rpt: 45/46	Nueces County Republican Executive Committee (CEC) 00055130								
4	Date	5 Payee name								
	10/28/2024	Sonny's Barbacoa & Restaurant								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$933.18	4066 S Port Ave								
		Corpus Christi, DE 78415								
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 Candidates meet & greet								
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI	1								
	Date	Payee name								
	11/18/2024	Spectrum								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$133.15	4001 Saratoga Blvd								
		Corpus Christi, TX 78413								
	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 services								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI	1								
	Date	Payee name								
	12/16/2024	Spectrum								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$133.15	4001 Saratoga Blvd								
		Corpus Christi, TX 78413								
	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 services								
H	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

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 Expense Printing Exper			Travel in Distric		
l	Credit Card Payment The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)	
l	Sch: 17/17 Rpt: 46/46			ounty Republican	Executive (Committee	(CEC)		00055130		
┰	Date	5	Payee name					_			\dashv
	11/13/2024		Whittingtor								
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Code					
	\$233.13		2414 Cleo	Street							
l											
	Corpus Christi, TX 78413										
8	PURPOSE	(a)	Category (S	See Categories listed at the	e top of this sch	edule) (b)	Description				
l	OF EXPENDITURE			/Fundraising Exp		,	_	outsi	ide of Texas. Con	nplete Schedule T.	
l	EXPENDITORE	l					_		, officeholder livin		
l							Reimbursem	ient	Watch Part	У	
l											
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	ficeholder name	C	Office sought			Office h	eld	