#### FORM PTY-CORP POLITICAL PARTY REPORT REGARDING FUNDS FROM CORPORATIONS AND LABOR ORGANIZATIONS **COVER SHEET PG 1** Filer ID 2 Total pages filed The Form PTY-CORP Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00023991 3 POLITICAL PARTY Collin County Republican Party (P) **OFFICE USE ONLY** NAME Date Received STATE OR COUNTY **ELECTRONICALLY FILED** State **PARTY** 01/10/2025 X County: Collin POLITICAL PARTY Democrat **TYPE** Republican Libertarian Other: Date Hand-delivered or Date Postmarked (Party name) Receipt # Amount POLITICAL PARTY ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE MAILING ADDRESS 2963 W. 15th St Date Processed Suite 2981 Change of Address Plano, TX 75075 Date Imaged POLITICAL PARTY TITLE **FIRST NICKNAME** LAST **SUFFIX** MΙ **CHAIR** Shelby Williams **CHAIR MAILING** ADDRESS / PO BOX; STATE: ZIP CODE APT / SUITE #; CITY; **ADDRESS** Change of Address CHAIR STREET STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **ADDRESS** 2963 W 15th St. Suite 2981 (Residence or Business) Plano, TX 75075 AREA CODE PHONE NUMBER **10** CHAIR PHONE **EXTENSION** (972) 312-9959 11 REPORT TYPE X January 15 8th day before primary election 50th day before general election July 15 12 PERIOD COVERED Month Day Year Month Day Year **THROUGH** 10/27/2024 12/31/2024

## FORM PTY-CORP **POLITICAL PARTY REPORT: TOTALS AND AFFIDAVIT COVER SHEET PG 2** 14 Filer ID 13 POLITICAL PARTY NAME (Ethics Commission Filers) 00023991 Collin County Republican Party (P) 15 TOTALS 1. TOTAL CONTRIBUTIONS FROM CORPORATE OR LABOR **ORGANIZATIONS** \$ 0.00 (OTHER THAN LOANS OR GUARANTEES OF LOANS) 2. TOTAL EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS \$ 136.23 3. TOTAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD 1,651.52 \$ A political party must file a report on FORM PTY-CORP for any reporting period during which the party accepts corporate or labor organization contributions, maintains corporate or labor organization contributions, or makes expenditures from corporate or labor organization contributions. 16 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Shelby Williams Signature of Political Party Chair

AFFIX NOTARY STAMP / SEAL

Sworn to and subscribed before me, by the said				s the	day
of	_, 20,	to certify which, witness my hand and sea	al of office.		

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

## FORM PTY-CORP **SUBTOTALS - PTYCORP COVER SHEET PG 3** 3 of 4 17 POLITICAL PARTY NAME 18 Filer ID (Ethics Commission Filers) Collin County Republican Party (P) 00023991 19 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR \$ **ORGANIZATION** SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR 2. \$ LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$ 3. SCHEDULE E: LOANS \$ SCHEDULE F1: EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION 5. X 136.23 \$ **CONTRIBUTIONS** SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$

# EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
Sch: 1/1 Rpt: 4/4	Collin County Republican Party (P) 00023991				
4 Date	5 Payee name				
11/15/2024	Texas Republic Bank				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$76.38	2595 Preston Rd.				
	Suite 100				
X Expenditure from corporate funds	Frisco , TX 75034				
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.				
	Bank Fees				
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH					
Date	Payee name				
12/13/2024	Texas Republic Bank				
Amount (\$)	Payee address; City; State; Zip Code				
\$59.85	2595 Preston Rd.				
	Suite 100				
X Expenditure from corporate funds	Frisco, TX 75034				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.				
	Bank Fees				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OH					