#### 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) 00017029 3 POLITICAL PARTY Nueces County Republican Party (P) **OFFICE USE ONLY** NAME Date Received STATE OR COUNTY **ELECTRONICALLY FILED** State **PARTY** 01/15/2025 X County: Nueces 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 5151 Flynn Parkway Date Processed Suite 103 Change of Address Corpus Christi, TX 78411-4318 Date Imaged POLITICAL PARTY TITLE **FIRST NICKNAME** LAST **SUFFIX** MΙ **CHAIR** Carmen Calderone **CHAIR MAILING** ADDRESS / PO BOX; STATE: ZIP CODE APT / SUITE #; CITY; **ADDRESS** Change of Address TX CHAIR STREET STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **ADDRESS** 7942 Land's End Drive (Residence or Business) Corpus Christi, TX 78414 AREA CODE PHONE NUMBER **10** CHAIR PHONE **EXTENSION** (484) 478-1999 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** 07/01/2024 12/31/2024 **GO TO PAGE 2**

# POLITICAL PARTY REPORT: TOTALS AND AFFIDAVIT

# FORM PTY-CORP COVER SHEET PG 2

13 POLITICAL PARTY NAME		14 Filer ID	(Ethics Commission Filers)	
Nueces County Republican Party (P)		00017029		
15 TOTALS	TOTAL CONTRIBUTIONS FROM ORGANIZATIONS  (OTHER THAN LOANS OR GUAR)		\$	1,000.00
	2. TOTAL EXPENDITURES FROM C LABOR ORGANIZATION CONTR	CORPORATE OR	\$	1,000.00
	3. TOTAL CONTRIBUTIONS MAINT LAST DAY OF REPORTING PER		\$	0.00
corporate or labor org	file a report on FORM PTY-CO ganization contributions, main rporate or labor organization	ntains corporate or labor o	od during wh	nich the party accepts contributions, or makes
16 AFFIDAVIT				
		I swear, or affirm, under penalty of true and correct and includes all ir under Title 15, Election Code.		
		Signature o	of Political Party C	Chair
	STAMP / SEAL  I before me, by the said, 20, to certify which, witness	s my hand and seal of office.	_, this the	day
Signature of officer ad	dministering oath Printed name	e of officer administering oath	Title of of	ficer administering oath

#### FORM PTY-CORP **SUBTOTALS - PTYCORP COVER SHEET PG 3** 17 POLITICAL PARTY NAME 18 Filer ID (Ethics Commission Filers) Nueces County Republican Party (P) 00017029 19 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR X \$ 1,000.00 **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 1,000.00 \$ **CONTRIBUTIONS** SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

### SCHEDULE C1

	The Instruction Guide explains how to complete this form.		1	Total pages Schedule C1: Sch: 1/1 Rpt: 4/5	
2	2 FILER NAME			3	Filer ID (Ethics Commission Filers)
	Nueces County Republican Party (P)			00017029	
4	Date	5	Corporation / Labor Organization name	7	Amount of contribution (\$)
	11/19/2024		Backhoe Lease Service Inc		\$1,000.00
		6	Corporation / Labor Organization address; City; State; Zip Code		
			CORPUS CHRISTI, TX 78414		

## **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-

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel 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: 5/5	Nueces County Republican Party (P) 00017029
	5 Payee name
11/30/2024	Reich Enterprises, Inc
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	P O Box 81281
X Expenditure from corporate funds	CORPUS CHRISTI, TX 78468
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.
	Office Rent
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held