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. 36 00037828 3 COMMITTEE NAME **OFFICE USE ONLY** Republican Party of Fort Bend County (CEC) Date Received **ELECTRONICALLY FILED** 07/15/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 461 Date Hand-delivered or Date Postmarked Sugar Land, TX 77487-0461 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Doug NAME NICKNAME LAST **SUFFIX** White STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 5423 Ashley Way Court STREET **ADDRESS** (Residence or Business) Sugar Land, TX 77479 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 461 MAILING **ADDRESS** Sugar Land, TX 77487 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 515-7540 PHONE REPORT January 15 30th day before election Final Report **TYPE** 10th day after campaign treasurer 8th day before election termination July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2025 06/30/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Republican Party of Fo	rt Bend County (CEC	c)	0003782	8
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		
	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 MADE ELECTRONICALLY) ort qualifies for the higher itemization threshold	\$	20.00
	1	CAL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	149,020.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ZED POLITICAL EXPENDITURES	\$	42.75
	4. TOTAL POLITION	CAL EXPENDITURES	\$	104,915.37
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT	L CONTRIBUTIONS MAINTAINED AS OF THE LAST ING PERIOD	DAY \$	71,658.98
OUTSTANDING LOAN TOTALS		AL AMOUNT OF ALL OUTSTANDING LOANS AS OF T E REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Mr. Doi	ug White	
		Signature of Car		surer
AFFIX NOTARY	STAMP / SEAL ABOV		. •	
Sworn to and subscribed	before me, by the said	, th	nis the	day
		fy which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of of	ficer administering oath

SUBTOTALS - CEC FORM CEC **COVER SHEET PG 3** 17 COMMITTEE NAME 18 Filer ID (Ethics Commission Filers) Republican Party of Fort Bend County (CEC) 00037828 19 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 149,020.00 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 3. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 104,915.37 \$ 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$

SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS

SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED

SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD

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	MONET	ARY POLITICAL CON	ITRIBUTION	S		SCHEDULE A1
	The Instru	ction Guide explains how to c	omplete this forn	1.	1	Total pages Schedule A1: Sch: 1/3 Rpt: 4/36
2	FILER NAME Republican F	Party of Fort Bend County (CEC)			3	Filer ID (Ethics Commission Filers) 00037828
4	Date 03/18/2025	 5 Full name of contributor or Chen, Victor 6 Contributor address; City; State; Zite 			7	Amount of Contribution (\$) \$2,500.00
_		Sugar Land, TX 77478	1_			
8	Owner	pation / Job title (See Instructions)		Employer (See Instructions V&S Remodel LLC)	
	Date 04/25/2025	Full name of contributor on the contributor of contributor address; City; State; Zity; State; Zi)		Amount of Contribution (\$) \$23,500.00
	Principal occu	Sugar Land, TX 77487 pation / Job title (See Instructions)		Employer (See Instructions		
	i illicipai occu	odion 7 300 title (See matucilons)		Employer (See manuchons	,	
	Date 03/24/2025	Full name of contributor out of Gary Gates for Texas Contributor address; City; State; Zi	ut-of-state PAC (ID#:)		Amount of Contribution (\$) \$25,000.00
		Rosenberg, TX 77471-2651				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	
	Date 03/17/2025	Full name of contributor ou Lois Kolkhorst Campaign Contributor address; City; State; Zi Brenham, TX 77834	ut-of-state PAC (ID#: ip Code			Amount of Contribution (\$) \$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	
	Date 05/02/2025	Miller, Darlene	ut-of-state PAC (ID#:)		Amount of Contribution (\$) \$500.00
	Principal occu Personal Fitr	pation / Job title (See Instructions)		Employer (See Instructions Waist Management)	
	2.30		1			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/3 Rpt: 5/36	
2	FILER NAME Republican I	Party of Fort Bend County (CEC)		3	Filer ID (Ethics Commission Filers) 00037828	
4	Date 03/18/2025	 Full name of contributor out-of-state PAC (ID#:_Orange Law PLLC Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$) \$2,500.00	_
_		Houston, TX 77036				_
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Principal occupation / Job title (See Instructions) 9 Employer (See Instruction Date			Amount of Contribution (\$) \$10,000.00	,	
	Principal occu		Employer (See Instructions)		_
		Republican Party of Fort Bend County Federal (Committee		Amount of Contribution (\$) \$20,000.00	-
	Principal occu	Sugar Land, TX 77087 pation / Job title (See Instructions)	Employer (See Instructions)		_
	Date 04/10/2025	Full name of contributor out-of-state PAC (ID#:_Rydin, Michael Contributor address; City; State; Zip Code Houston, TX 77081			Amount of Contribution (\$) \$10,000.00	-
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions HCSS)		_
	Date 04/02/2025	Full name of contributor out-of-state PAC (ID#:_Sheikhani, Ali Contributor address; City; State; Zip Code Houston , TX 77036-2008			Amount of Contribution (\$) \$5,000.00	,
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Self)		_

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHED	JLE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/3 Rpt: 6/36	
2	FILER NAME Republican	Party of Fort Bend County (CEC)		3	Filer ID (Ethics Commis 00037828	sion Filers)
4	Date 03/17/2025	 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$	\$2,500.00
		Houston, TX 77043				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 03/04/2025	Full name of contributor out-of-state PAC (ID#: Wong, Daniel Contributor address; City; State; Zip Code		•	Amount of Contribution (\$	\$40,000.00
		Missouri City, TX 77459				
	Principal occu Business Ov	upation / Job title (See Instructions) wner	Employer (See Instructions Tolunay-Wong Enginee			
	Date 04/01/2025	Full name of contributor out-of-state PAC (ID#: Wong, Daniel Contributor address; City; State; Zip Code Missouri City, TX 77459)		Amount of Contribution (\$	\$2,500.00
	Principal occu Business Ov	upation / Job title (See Instructions)	Employer (See Instructions Tolunay-Wong Enginee			

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		Gift/Awards/Memorials Expe Legal Services The Instruction Guide	Salaries/\	Wages	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed al	oove)
⊢		1		explains now to co	mpic	te tills form.	_			
1	Total pages Schedule F1:	l		0 (050)			3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 1/30 Rpt: 7/36	•	Party of Fort Bend	County (CEC)				00037828		
4	Date	5 Payee name								
	01/10/2025	7-Eleven								
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode					
	\$57.56	11801 S T	exas 6							
		Sugar Land	i, TX 77498							
8	PURPOSE	_			(h)	Description				
ľ	OF	Travel In D	ee Categories listed at the to	p of this schedule)	(5)	Description Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	Haverind	Strict			_		officeholder living		
						Fuel for chair				
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ıght			Office he	eld	
	expenditure to benefit C/OI	4								
F	Date	Payee name	1							
	02/27/2025	7-Eleven								
H	Amount (\$)	Payee addre	ess; City;	State; Zip Co	nde.					
	\$56.36	11801 S T		State, Zip Ct	Juc					
	φ50.50	1100131	exas o							
			>							
		Sugar Land	i, TX 77498							
	PURPOSE OF		ee Categories listed at the to	p of this schedule)	(b)	Description				
	EXPENDITURE	Travel In D	istrict			=		de of Texas. Com officeholder living	plete Schedule T.	
						Fuel for party			у схренас	
						. acc. pay	0			
H	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ıaht			Office he	ald.	
	expenditure to benefit C/OI			000	.g			000		
⊨	Data	Davis a marine								
	Date 03/11/2025	Payee name Advanced (
	Amount (\$)	Payee addre		State; Zip Co	ode					
	\$49.95	466 Marsha	ali way n							
		Layton, UT	84041							
	PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description				
	OF EXPENDITURE	Advertising	Expense						plete Schedule T.	
						Advertising E		officeholder living	j expense	
						Auvertising E	.vh	51136		
\vdash	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ıaht			Office he	2ld	
	expenditure to benefit C/OI		iccholuci name	Office Suc	agrit			Office H	Jiu	
\vdash										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/30 Rpt: 8/36	Republican Party of Fort Bend County (CEC) 00037828
4	Date	5 Payee name
	04/28/2025	Anthonie's Market Grill
6	Amount (\$) \$1,795.85	7 Payee address; City; State; Zip Code 9108 Farm to Market 1489
		Simonton , TX 77476
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food for LRD Volunteers
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/27/2025	Aristotle
	Amount (\$) \$799.50	Payee address; City; State; Zip Code 205 Pennsylvania Ave SE
		Washington, DC 20003
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/20/2025	Aristotle
	Amount (\$) \$799.50	Payee address; City; State; Zip Code 205 Pennsylvania Ave SE
		Washington, DC 20003
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 3/30 Rpt: 9/36	Republican Party of Fort Bend County (CEC) 00037828
4	Date	5 Payee name
	02/03/2025	Art by KVK
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,600.00	18820 N 93rd St
		Scottsdale, AZ 85255
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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		LRD Event Expense for art vendor
_	Occupation ONLY if allowed	Out district Office held a group of the second of the seco
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/07/2025	Art by KVK
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,600.00	18820 N 93rd St
		Scottsdale, AZ 85255
	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 2025 LRD expense for art vendor
		2023 LIND expense for art vendor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	
	Date 04/24/2025	Payee name
		Blackburn, Brittany
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	515 Rozelle Ave
		Sugar Land, TX 77498
	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
		2025 LRD Balloon decoration expense
		Lord Live Balloon doostallon oxponde
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

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

Fees Office (Fees Office (Fees

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schodule F1:		_
1	Total pages Schedule F1: Sch: 4/30 Rpt: 10/36	Republican Party of Fort Bend County (CEC) 3 Filer ID (Ethics Commission Filers) 00037828	
4	Date	5 Payee name	
	04/16/2025	Buford, Cheryl	
6	Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 811 Merrick Dr	
		Sugar Land, TX 77478	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
		Candidate/Officeholder/Political Committee	
		Contribution to school board campaign for FBISD	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
_	Data		=
	Date	Payee name	
	01/02/2025	CJ Park & Associates	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,500.00	6338 Wilshire Blvd	
		Houston, TX 77478	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Rent Expense	
		Tient Expense	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Date	Payee name	
	02/05/2025	CJ Park & Associates	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,585.57	6338 Wilshire Blvd	
		Houston, TX 77478	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense	
		Check if Austin, TX, officeholder living expense	
		Rent and Utility Expense	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Servi				/ages	ete this form.		Travel Out o		trict category not listed abo	ve)
1	Total pages Schedule F1:	2	FILER NAME			<u> </u>		-		3	Filer ID		(Ethics Commission	on Filers)
	Sch: 5/30 Rpt: 11/36		Republican		Fort Bend	l County	(CEC)				0003782	28		
4	Date	5	Payee name											
	03/04/2025		CJ Park & A	Associate	es									
6	Amount (\$)	7	Payee addre	ss; C	ity;	State	; Zip Co	de						
	\$1,707.66		6338 Wilshi	re Blvd										
			Houston, T	X 77478										
8	PURPOSE	(a)	Category (S	ee Categorie	s listed at the to	op of this sch	nedule)	(b)	Description					
	OF EXPENDITURE		Office Over	head/Re	ntal Exper	nse			Check if travel Check if Austin				olete Schedule T.	
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										-,				
9	Complete ONLY if direct		Candidate/Offi	ceholder	name	(Office sou	ght			Office	e he	eld	
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	Date		Payee name											
	04/01/2025		CJ Park & A	Associate	es									
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	\$1,500.00		6338 Wilshi	ire Blvd										
			Houston, T	X 77478										
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	expenditure to benefit C/OI	Н												
	Date		Payee name											
	06/02/2025		CJ Park & A	Associate	es									
	Amount (\$)		Payee addre	ss; C	ity;	State	; Zip Co	de						
	\$1,500.00		6338 Wilshi	re Blvd										
			Los Angele	s , TX 77	'478									
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									Rent expens		,	9		
									•					
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	expenditure to benefit C/OI	Н												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		nittee	Legal Services The Instruction	•		Vages	/Contract Labor		OTHER (enter a	strict a category not listed al	oove)
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1	Total pages Schedule F1:	l							3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 6/30 Rpt: 12/36	R	Republican	Party of Fort	Bend County	/ (CEC)				00037828		
4	Date	5 P	ayee name									
l	05/08/2025		J Park & A	ssociates								
ہا					Ctate	- 7in Ca	-d					
ľ	Amount (\$)	l	ayee addres		State	e; Zip Co	ue					
	\$1,708.85	6	338 Wilshi	re Biva								
		H	louston, T≻	〈 77478								
8	PURPOSE	(a) C	`ategory (ca	e Categories listed	at the ten of this co	ab a du la)	(b)	Description				
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								Rent expense	Э			
9	Complete ONLY if direct	l Ca	ndidate/Offi	ceholder name		Office sou	aht			Office h	ماط	
ľ	expenditure to benefit C/OI		indidate/Onit	cholder hame		Office 300	grit			Office fi	ciu	
┕												
	Date	P	ayee name									
	02/10/2025	C	Chalmers, A	dams, Backe	r & Kaufmar	ı LLC						
	Amount (\$)	Р	ayee addres	ss; City;	State	e; Zip Co	de					
	\$1,500.00	5	805 State I	Bridge Rd								
	. ,			J								
		Ι,	abaa Craal	CA 20007								
		J	onns Creei	k , GA 30097								
	PURPOSE	(a) C	Category (Se	e Categories listed	at the top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE	L	egal Servio	ces				=			nplete Schedule T.	
								—	, IX,	officeholder livin	g expense	
								Legal Fees				
L												
	Complete ONLY if direct		ındidate/Offic	ceholder name		Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	1										
Г	Date	Р	ayee name									
	02/14/2025	l c	Chalmers, A	dams, Backe	r & Kaufmar	ı LLC						
⊢	Amount (\$)	<u> </u>	ayee addres			e; Zip Co	do					
	` '	l	,		Siale	ε, Ζι ρ Cc	ue					
	\$800.00	3	805 State I	onage Ru								
		J	ohns Creel	k , GA 30097								
	PURPOSE	(a) C	Category (Se	e Categories listed	at the top of this sc	:hedule)	(b)	Description				
	OF	ı	egal Servic			,			outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		3					Check if Austin,	, TX,	officeholder livin	g expense	
								Legal Fees				
Г	Complete ONLY if direct	Ca	ındidate/Offic	ceholder name		Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
\vdash												
l												

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	ll 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: 7/30 Rpt: 13/36	Republican Party of Fort Bend County (CEC) 00037828
4	Date	5 Payee name
	05/08/2025	Checks in the Mail
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$101.21	2435 Goodwin Lane
		New Braunfels, TX 78135
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 Printing services
		Tilluling Services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	
		Payee name
	04/04/2025	Chevron
	Amount (\$)	Payee address; City; State; Zip Code
	\$68.63	1531 FM359
		Richmond, TX 77406
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense Fuel for travel in district
		r der for traver in district
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Pouce name
	04/16/2025	Payee name Chevron
	Amount (\$)	Payee address; City; State; Zip Code
	\$65.75	1531 FM359
		B: 1
		Richmond, TX 77406
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fuel for chairman to travel in district
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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

Glft/Awards/Memorials Expense Printing Expense Travel Out of District I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
The Instruction Guide explains how to complete this form.
2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Republican Party of Fort Bend County (CEC) 00037828
5 Payee name
Chevron
7 Payee address; City; State; Zip Code
1531 FM359
Richmond, TX 77406
·
(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officeholder living expense
Fuel for chairman to travel in district
Candidate/Officeholder name Office sought Office held
1
Payee name
Comcast
Payee address; City; State; Zip Code
PO Box 60533
City of Industry , CA 91716-0533
(a) Category (See Categories listed at the top of this schedule) (b) Description
Office Overhead/Rental Expense
Check if Austin, TX, officeholder living expense
Internet expense
Condidate/Officeholder name
Candidate/Officeholder name Office sought Office held
Payee name
Comcast
Payee address; City; State; Zip Code
PO Box 60533
City of Industry, CA 91716-0533
(a) Category (See Categories listed at the top of this schedule) (b) Description
Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officeholder living expense
Internet Expense
Condidate/Officeholder name Office south
Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	Expense		oense ages/Contract Labor	Travel in Distr Travel Out of I OTHER (enter	
1	Total pages Schedule F1:	l			(CEC)		3 Filer ID	(Ethics Commission Filers)
L	Sch: 9/30 Rpt: 15/36	·	an Party of Fort Bei	na County (CEC)		00037828	5
4	Date 03/07/2025	5 Payee nan Comcast						
6	Amount (\$)	7 Payee add	lress; City;	State;	Zip Cod	le		
	\$214.66	PO Box 6	0533					
		City of Inc	dustry , CA 91716-0	0533				
8	PURPOSE	(a) Category	(See Categories listed at the	e top of this sche	dule) ((b) Description		
	OF EXPENDITURE	Office Ov	erhead/Rental Exp	ense		=	outside of Texas. Co	
						Internet expe	n, TX, officeholder livi ENSE	ווון כאףפווספ
9	Complete ONLY if direct expenditure to benefit C/Oh		Officeholder name	Of	ffice soug	ht	Office	held
H	Date	Payee nan	ne					
	04/07/2025	Comcast						
	Amount (\$)	Payee add	Iress; City;	State;	Zip Cod	le		
	\$214.66	PO Box 6	60533					
		City of Ind	dustry , CA 91716-0	0533				
	PURPOSE	(a) Category	(See Categories listed at the	e top of this sche	dule)	(b) Description		
	OF EXPENDITURE		erhead/Rental Exp			<u> </u>	outside of Texas. Co	
							n, TX, officeholder livi	ing expense
						or oxpe	50 .01 011100	
	Complete ONLY if direct expenditure to benefit C/O		Officeholder name	Of	ffice soug	ht	Office	held
	Date	Payee nan	ne					
	05/02/2025	Comcast						
	Amount (\$)	Payee add	Iress; City;	State;	Zip Cod	le		
	\$214.66	PO Box 6	60533					
		City of Ind	dustry , CA 91716-0	0533				
	PURPOSE	(a) Category	(See Categories listed at the	e top of this sche	dule)	(b) Description		
	OF EXPENDITURE		erhead/Rental Exp				outside of Texas. Co	
						ш	n, TX, officeholder livi ense for office	ing expense
						omot oxpc	222 101 011100	
	Complete ONLY if direct	Candidate/C	Officeholder name	Ot	ffice soug	ht	Office	held
	expenditure to benefit C/O	H						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	ll 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: 10/30 Rpt: 16/36	Republican Party of Fort Bend County (CEC) 00037828
4	Date	5 Payee name
	06/09/2025	Comcast
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$214.66	PO Box 60533
		City of Industry, CA 91716-0533
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 Internet expense for office
		internet expense for onice
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	06/20/2025	DeVine Promotions
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$831.46	P.O. Box 87355
		Houston, TX 77287
	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 2025 LRD Awards for volunteers expense
		2020 Et 10 7 marao foi volunteoro exponso
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/26/2025	DiscPro Printing & Graphics
	Amount (\$)	Payee address; City; State; Zip Code
	\$7,278.00	PO Box 1581
		Houston , TX 77251
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense Campaign signs and pushcards from prior election
		cycle
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		
ı		

SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pot listed above)

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: Sch: 11/30 Rpt: 17/36 Republican Party of Fort Bend County (CEC) 3 Filer ID (Ethics Commiss 00037828) 4 Date O4/07/2025 Spayee name Flickr.com 6 Amount (\$) 7 Payee address; City; State; Zip Code 390 Fremont St San Francisco, CA 74105 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Online storage for photos	sion Filers)
Sch: 11/30 Rpt: 17/36 Republican Party of Fort Bend County (CEC) 4 Date	
6 Amount (\$) \$141.50 7 Payee address; City; State; Zip Code \$390 Fremont St San Francisco, CA 74105 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
6 Amount (\$) \$141.50 7 Payee address; City; State; Zip Code 390 Fremont St San Francisco, CA 74105 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
\$141.50 390 Fremont St San Francisco, CA 74105 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
San Francisco, CA 74105 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
OF EXPENDITURE Office Overhead/Rental Expense Office Overhead/Rental Expense Check if Austin, TX, officeholder living expense	
OF EXPENDITURE Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Chimic storage for photos	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Payee name	
05/02/2025 Gremminger, Lily	
Amount (\$) Payee address; City; State; Zip Code	
\$100.00 1910 Fawn Way CT	
Richmond, TX 77406-1370	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE Salaries/Wages/Contract Labor Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Office Cleaning Expense	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Payee name	
06/06/2025 Gremminger, Lois	
Amount (\$) Payee address; City; State; Zip Code	
\$1,519.82 1910 Fawn Way CT	
Richmond, TX 77406-1370	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description (c) Check if travel outside of Taxas Complete Schedule Tax	
EVENT Expense Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
2025 LRD event center pieces reimbursen	nent
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica		mmittee	Legal Services		Salaries/W		se s/Contract Labor		OTHER (enter a	strict category not liste	ed above)
	Credit Card Payment			The Instruction G	uide explains ho	ow to cor	nple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Com	mission Filers)
	Sch: 12/30 Rpt: 18/36		Republican	Party of Fort Be	end County (C	CEC)				00037828		
4	Date	5	Payee name					•				
	04/17/2025		Gremminge	r, Lois								
6	Amount (\$)	7	Payee addres	ss; City;	State:	Zip Coo	de					
•	\$2,600.00		1910 Fawn			_,, -,,						
	, —, · · · · · ·			,								
			Dichmond '	TX 77406-1370								
_		<u> </u>					<i>.</i>					
8	PURPOSE OF	(a)		ee Categories listed at t	he top of this sched	ule)	(b)	Description		de of Toyon Com	unlata Cabadula T	
	EXPENDITURE		Event Expe	nse				=		de of Texas. Com officeholder living		
								2025 LRD ref				double
								payment on a	uc	tion item		
9	Complete ONLY if direct		Candidate/Offi	ceholder name	Off	fice soug	aht			Office h	eld	
	expenditure to benefit C/OI	Н				`	,					
=	Date	Т	Payee name									
	04/07/2025		Haar, Jenni	fer								
	Amount (\$)	├	Payee addres		State:	Zip Coo	do					
	\$266.67		•	nt Auburn Dr	Siale,	Zip Co	ue					
	Ψ200.07		24013 MOUI	ii Aubuiii Di								
			1/-t - T/ 77	404								
		L	Katy, TX 77									
	PURPOSE OF	(a)		ee Categories listed at t	the top of this sched	ule)	(b)	Description		do of Toyon Com	unlata Cabadula T	
	EXPENDITURE		Event Expe	nse				=		de of Texas. Com officeholder living		
								2025 LRD ex				supplies
	Complete ONLY if direct		Candidate/Offi	ceholder name	Off	fice soug	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date	Г	Payee name									
	04/30/2025		Haar, Jenni	fer								
	Amount (\$)	\vdash	Payee addres		State;	Zip Cod	de					
	\$61.60		,	nt Auburn Dr	,							
			Katy, TX 77	494								
	PURPOSE	(2)				1	(h)	Description				
	OF	(a)		ee Categories listed at t	the top of this sched	ule)	(D)	Description Check if travel of	outsi	de of Texas. Com	plete Schedule T	
	EXPENDITURE		Event Expe	1156						officeholder living		
								Event expens	se r	eimbursem	ent on supp	lies
	Complete ONLY if direct		Candidate/Offi	ceholder name	Off	fice souç	ght			Office h	eld	
	expenditure to benefit C/OI	Н										

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 13/30 Rpt: 19/36	Republican Party of Fort Bend County (CEC) 00037828	
4	Date	5 Payee name	
	01/13/2025	Home Depot	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$12.28	5900 Hwy 6	
		Missouri City, TX 77459	
8	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	
		Office Supplies	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
⊨	Dete		=
	Date	Payee name	
L	01/09/2025	Indo-American Conservatives of Texas PAC	
l	Amount (\$)	Payee address; City; State; Zip Code	
	\$300.00	8303 Southwest Freeway	
		Houston, TX 77074	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
		Contribution to holiday party	
L			
l	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit C/OI	7	
	Date	Payee name	
	06/24/2025	Krishna Sounds	
Н	Amount (\$)	Payee address; City; State; Zip Code	_
l	\$750.00	6350 Alpine Trail Lane	
		Katy, TX 77494	
⊢	PURPOSE		_
l	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Sound system for CEC meeting	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
\vdash			_
ı			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	Salaries/	Expens Wages	se s/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	
1	Total pages Schedule F1:						ı	Filer ID	(Ethics Commission Filers)
	Sch: 14/30 Rpt: 20/36		Party of Fort Bend	County (CEC)				00037828	
4		5 Payee name							
	04/29/2025	Krishna So							
6	Amount (\$)	7 Payee addre		State; Zip C	ode				
	\$750.00	p 6350 Alpine	e Trail Lane						
		Katy, TX 77	7494						
8	PURPOSE		See Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Event Expe	ense			_		de of Texas. Com officeholder living	nplete Schedule T. g expense
						CEC Meeting			ુ γ
						3		-	
9	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office so	ught			Office he	eld
_	Date	Payee name	<u> </u>				_		
	02/05/2025	Mailchimp							
H	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode		—		
	\$294.22	1	De Leon Ave NE	, ,					
		Atlanta, GA			T				
	PURPOSE OF		See Categories listed at the top	of this schedule)	(b)	Description Check if travel of	Olito:	de of Tevas Carr	nplete Schedule T.
	EXPENDITURE	Advertising	r ⊏xpense					de of Texas. Com officeholder living	
						Generic mark	ketir	ng eblast ex	pense
	Complete ONLY if direct expenditure to benefit C/OF		ficeholder name	Office so	ught			Office he	eld
	Date	Payee name	;				_		
	02/26/2025	Mailchimp							
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode				
	\$294.22	675 Ponce	De Leon Ave NE						
		Atlanta, GA	v 30308						
	PURPOSE	· ·			(h)	Description			
	OF	Advertising	See Categories listed at the top Expense	or this schedule)	(3)		outsio	de of Texas. Com	nplete Schedule T.
	EXPENDITURE		,,pooo			Check if Austin,	ı, TX,	officeholder living	g expense
						Generic mark	ketir	ng eblast ex	rpense
	O-male Committee				<u></u>				-1.4
	Complete ONLY if direct expenditure to benefit C/OF		ficeholder name	Office so	ught			Office he	eid

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi 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		mmittee	Legal Services	Salaries/\	Wages	s/Contract Labor		OTHER (enter	a category not listed a	bove)
				The Instruction Guid	e explains how to co	ompl	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 15/30 Rpt: 21/36		Republican	Party of Fort Bend	d County (CEC)				00037828		
4	Date	5	Payee name								
	03/26/2025		Mailchimp								
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip Co	ode					
	\$294.22			De Leon Ave NE							
			Atlanta, GA	30308							
Ļ	DUDDOCE	(-)				(1-)					
8	PURPOSE OF	(a)		ee Categories listed at the t	top of this schedule)	(b)	Description	outo:	de of Toyloo Cor	molete Cebedule T	
	EXPENDITURE		Advertising	Expense					officeholder livin	nplete Schedule T.	
							Generic mark				
									J	•	
9	Complete ONLY if direct		 Candidate/Offi	ceholder name	Office sou	<u>l</u> ught			Office h	ield	
	expenditure to benefit C/O	Н				J					
\vdash	Date	Т	Payee name								
	04/28/2025		Mailchimp								
_		┝	Payee addres	City:	State; Zip Co	ada					
	Amount (\$)		•		State, Zip Ct	Jue					
	\$294.22		675 Pulice I	De Leon Ave NE							
			Atlanta, GA	30308							
	PURPOSE	(a)	Category (Se	ee Categories listed at the t	top of this schedule)	(b)	Description				
	OF EXPENDITURE		Advertising	Expense			<u> </u>			nplete Schedule T.	
							—		officeholder livin	ig expense	
							Generic eblas	St II	narkeung		
	Complete ONL V if direct	<u> </u>	Condidate/Offi	achaldar nama	Office cou	ıabt			Office h	old	
	Complete ONLY if direct expenditure to benefit C/O		Januluale/Oni	ceholder name	Office sou	agrit			Office i	ieiu	
		_									
	Date		Payee name								
	05/27/2025		Mailchimp								
	Amount (\$)		Payee address	ss; City;	State; Zip Co	ode					
	\$294.22		675 Ponce	De Leon Ave NE							
			Atlanta, GA	30308							
	PURPOSE	(a)	Category (St	ee Categories listed at the t	ton of this schedule)	(b)	Description				
	OF EXPENDITURE	``	Advertising		top or time contiduity	` `		outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		.	,			Check if Austin	, TX,	officeholder livin	ig expense	
							Generic eblas	st n	narketing		
	Complete ONLY if direct		Candidate/Offi	ceholder name	Office sou	ught			Office h	eld	
	expenditure to benefit C/OI	H									

SCHEDULE F1

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OFUED (one for processors and listed chara)

	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: 16/30 Rpt: 22/36	Republican Party of Fort Bend County (CEC) 00037828	
4	Date	5 Payee name	_
	06/27/2025	Mailchimp	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
Ü	\$294.22	675 Ponce De Leon Ave NE	
	Ψ234.22	070 T Office De Leon 7 We NE	
		Adams 04 20000	
		Atlanta, GA 30308	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Generic eblast marketing	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Date	Payee name	_
	06/25/2025	Mammoth Marketing Group	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,553.20	4500 Bissonnet St	
	Ψ4,333.20	Ste 370	
		Bellaire, TX 77401	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		2025 LRD Printing Expense	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
	Date	Payee name	_
	05/13/2025	Marsters, Vanessa	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5,000.00	3002 Forest View	
	·		
		Richmond, TX 77406	
	PURPOSE	I a .	
	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
		Donation for school board campaign	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - 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	
┰	Total pages Cabadula 51:	<u> </u>
1	Total pages Schedule F1: Sch: 17/30 Rpt: 23/36	2 FILER NAME Republican Party of Fort Bend County (CEC) 3 Filer ID (Ethics Commission Filers) 00037828
4	Date	5 Payee name
	04/01/2025	Mathis, Martha
6	Amount (\$) \$281.61	7 Payee address; City; State; Zip Code 4018 Sand Terrace Dr Katy, TX 77450
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Event Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense Election committee outreach expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/18/2025	OfficeDepot Office Max
	Amount (\$)	Payee address; City; State; Zip Code
	\$18.39	5766 Hwy 6
	DUDDOG	Missouri City, TX 77459
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Chapter it travel a viside of Taylor Camplete Schedule T
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Office Supplies
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/16/2025	Perez, Victor
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	4715 Bryce Landing Ln
		Katy, TX 77494
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Contribution to school board campaign for KISD
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense 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	
_		<u>_</u>
1	Total pages Schedule F1: Sch: 18/30 Rpt: 24/36	2 FILER NAME Republican Party of Fort Bend County (CEC) 3 Filer ID (Ethics Commission Filers) 00037828
4	Date	5 Davisa nama
4	05/15/2025	5 Payee name Randle High School
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,240.00	7600 Koeblen Rd
	• •	
		Disharand TV 77400
		Richmond, TX 77469
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	ZA ZIIDII GILZ	Candidate/Officeholder/Political Committee
		Donation for football team dinner sponsorship
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
F	Date	Payee name
	03/04/2025	Reliant Energy
	Amount (\$)	Payee address; City; State; Zip Code
	\$118.00	1201 Fannin St
		Houston, TX 77002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Utility expense for office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Daygo namo
		Payee name
	05/08/2025	Reliant Energy
	Amount (\$)	Payee address; City; State; Zip Code
	\$118.00	1201 Fannin St
		Houston, TX 77002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Utility expense for office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Gard Layment	The Instruction Guide explains how to complete this fo	orm.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 19/30 Rpt: 25/36	Republican Party of Fort Bend County (CEC)	00037828
4	Date	5 Payee name	
	02/12/2025	Safari Texas Ranch	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$750.75	11627 FM 1464	
		Richmond, TX 77479	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	ition
	OF EXPENDITURE	Event Expense	k if travel outside of Texas. Complete Schedule T.
		1	k if Austin, TX, officeholder living expense leeting venue expense
		SES II	recting venue expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		0000
_	Date	Payee name	
	01/22/2025	Seth & Alexander Advisors	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	52 Sugar Creek Center Blvd	
	φου.υυ	32 Sugar Greek Schick Biva	
		Sugar Land TV 77470	
		Sugar Land, TX 77478	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	tion k if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	/iccounting/Danking	k if Austin, TX, officeholder living expense
		Bookke	eeping Fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	H	
	Date	Payee name	
	02/18/2025	Seth & Alexander Advisors	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	52 Sugar Creek Center Blvd	
		Sugar Land, TX 77478	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	tion
	OF EXPENDITURE	Accounting/Banking	k if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	ı	k if Austin, TX, officeholder living expense
		BOOKK	eeping Expense
	Complete ONLY if alias -t	Condidate/Officeholder name	Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 20/30 Rpt: 26/36	Republican Party of Fort Bend County (CEC) 00037828
4	Date	5 Payee name
	04/01/2025	Seth & Alexander Advisors
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 52 Sugar Creek Center Blvd Sugar Land, TX 77478
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bookkeeping fees
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/16/2025	Seth & Alexander Advisors
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 52 Sugar Creek Center Blvd Sugar Land, TX 77478
_	PURPOSE	
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bookkeeping fees
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/02/2025	Seth & Alexander Advisors
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 52 Sugar Creek Center Blvd
		Sugar Land, TX 77478
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bookkeeping fee
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Frinting Expense Legal Services Salaries/Mages/Contract Labor

	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: 21/30 Rpt: 27/36	Republican Party of Fort Bend County (CEC) 00037828
4	Date	5 Payee name
	06/17/2025	Seth & Alexander Advisors
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	52 Sugar Creek Center Blvd
		Sugar Land, TX 77478
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Bookkeeping fees
<u>_</u>	0 1. 0	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/17/2025	Shell Service Station
	Amount (\$)	Payee address; City; State; Zip Code
	\$69.37	2465 FM 1092 Rd
		Missouri City, TX 77459
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Fuel for chairman expense
	0 1: 0: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1:	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	•	
	Date	Payee name
	02/03/2025	Shell Service Station
	Amount (\$)	Payee address; City; State; Zip Code
	\$66.70	2465 FM 1092 Rd
		Missouri City, TX 77459
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Fuel for Party Chairman expense
_	Operation ONE VIII II	Out like 10ff as halden name.
	Complete <u>ONLY</u> 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 Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

1 Total pages Schedule F1: 2 FILER NAME Republican Party of Fort Bend County (CEC) 3 File R D (Effics Commission Files) Sch: 22/30 Rpt: 28/36 Republican Party of Fort Bend County (CEC) 00037828 5 Payee name Shell Service Station 6 Amount (8) 7 Payee address: City; State; Zip Code S66.92 8 PURPOSE OF EXPENDITURE (a) Category (see Casegores lised at the top of this schedule) City of Payee address (City; State; Zip Code S0/24/2025 Payee address; City; State; Zip Code S66.40 PURPOSE OF EXPENDITURE (b) Candidate/Officeholder name Coffice sought Office held Complete CNILY; if direct expenditure to benefit C/OH Purpose OF EXPENDITURE (b) Category (see Categores lised at the top of this schedule) Complete CNILY; if direct expenditure to benefit C/OH Date Complete CNILY; if direct expenditure to benefit C/OH Date Payee name Shell Service Station Amount (8) Payee name Complete CNILY; if direct expenditure to benefit C/OH Date Payee name Shell Service Station Amount (8) Payee name Shell Service Station Amount (8) Payee name Shell Service Station Amount (8) Payee name Shell Service Station Amount (9) Payee name Shell Service Station State Stat		Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)							
Sch: 22/30 Rpt: 28/36 Republican Party of Fort Bend County (CEC) 00037828 4 Date	Ļ		The Instruction Guide explains how to complete this form.							
Date Shell Service Station	1									
Shell Service Station Shell Service Station 7 Payee address: City; State; Zip Code 866.92 8 PURPOSE OF Travel In District 9 Complete ONLY if direct expenditure to benefit C/OH Date OF EXPENDITURE Payee name Shell Service Station Payee address; City; State; Zip Code Shell Service Station Payee name Office sought Office held Missouri City, TX 77459 PURPOSE OF EXPENDITURE (a) Category (see Categores listed at the top of this schedule) Travel In District Office held		•								
Total Payee address: City; State; Zip Code	4	Date	,							
\$66.92 2465 FM 1092 Rd Missouri City, TX 77459 8 PURPOSE OF EXPENDITURE (a) Category (see Categores Isseed at the top of this schedule) 9 Complete ONLY if direct expenditure to benefit C/OH Date 03/24/2025 Amount (\$) Payee name Side Category (see Categores Stated at the top of this schedule) PURPOSE OF EXPENDITURE (a) Category (see Categores Stated at the top of this schedule) Travel In District (b) Description Office held		03/07/2025	Shell Service Station							
Missouri City, TX 77459 8 PURPOSE OF EXPENDITURE (a) Category (see Categories letted at the top of this schedule) (b) Description check if rever outside of Texas. Complete Schedule T. check if Austin, TX, officiehoder living expenses Fuel for party chairman 9 Complete ONLY if direct expenditure to benefit C/OH Date O3/24/2025 Amount (\$) Payee name Shell Service Station Amount (\$) Payee address; City, State; Zip Code Category (see Categories letted at the top of this schedule) Check if Invate fusible of Texas. Complete Schedule T. Check if Austin, TX, officiehoder living expenses Fuel for party chairman PURPOSE OF EXPENDITURE (a) Category (see Categories letted at the top of this schedule) Check if Invate fusible of Texas. Complete Schedule T. Check if Austin, TX, officiehoder living expenses Fuel for party chairman Complete ONLY if direct expenditure to benefit C/OH Date O4/11/2025 Payee name Shell Service Station Amount (\$) Payee address; City, State; Zip Code S62.34 Category (see Categories letted at the top of this schedule) Check if Invate outside of Texas. Complete Schedule T. Check if Austin, TX, officiehoder living expenses Fuel for party chairman Check if Invate outside of Texas. Complete Schedule T. Check if Austin, TX, officiehoder living expenses Fuel for chairman to travel in District Complete ONLY if direct Candidate/Officeholder name Check if Invate outside of Texas. Complete Schedule T. Check if Invate outside of Texas. Complete Schedule T. Check if Invate outside of Texas. Complete Schedule T. Check if Invate outside of Texas. Complete Schedule T. Check if Invate outside of Texas. Complete Schedule T. Check if Invate outside of Texas. Complete Schedule T. Check if Invate outside of Texas. Complete Schedule T. Check if Invate outside of Texas. Complete Schedule T. Check if Invate outside of Texas. Complete Schedule T. Check if Invate outside of Texas. Complete Schedule T. Check if Invate outside of Texas. Complete Schedule	6	Amount (\$)	7 Payee address; City; State; Zip Code							
Purpose OF EXPENDITURE		\$66.92	2465 FM 1092 Rd							
Purpose OF EXPENDITURE										
Check if zwel outside of Texas. Complete Schedule T. Check if Justin, TX, officeholder living expense Fuel for party chairman			Missouri City, TX 77459							
Circle of the collection of the content of the co	8		(a) Category (See Categories listed at the top of this schedule) (b) Description							
9 Complete ONLY if direct expenditure to benefit C/OH Date O3/24/2025 Payee name Shell Service Station Amount (\$) Payee address; City; State; Zip Code \$64.40 Z465 FM 1092 Rd Missouri City, TX 77459 Complete ONLY if direct expenditure to benefit C/OH Date O4/11/2025 Candidate/Officeholder name Office sought Date O4/11/2025 Payee address; City; State; Zip Code Date O4/11/2025 Payee name O4/11/2025 Payee name O4/11/2025 Date O4/11/2025 Payee name O4/11/2025 Payee name O4/11/2025 Date O4/11/2025 Payee name O4/11/2025 Payee name O4/11/2025 Candidate/Officeholder name Office sought Office hold Date O4/11/2025 Payee name O4/11/2025 Candidate/Officeholder name Office sought Officeholder name Office hold Date O4/11/2025 Payee name O4/11/2025 Candidate/Officeholder name Office hold Date O4/11/2025 Payee name O4/11/2025 Candidate/Officeholder name Office hold Date O4/11/2025 Payee name O4/11/2025 Candidate/Officeholder name Office hold Date O4/11/2025 Payee name O4/11/2025 Candidate/Officeholder name O4/11/2025 Date O4/11/2025 Candidate/Officeholder name O4/11/2025 Candidate/Officeholder name O4/11/2025 Date O4/11/2025 Candidate/Officeholder name O4/11/2025 Candidate/Officeh			Travel In District Check if travel outside of Texas. Complete Schedule T.							
9 Complete ONLY if direct expenditure to benefit C/OH Date O3/24/2025 Payee name Shell Service Station Amount (\$)		THE LIBERT ONL								
Date 03/24/2025 Amount (\$) Payee address; City; State; Zip Code 2465 FM 1092 Rd Missouri City, TX 77459 PURPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office held Payee andress; City; State; Zip Code Office held Description Check if Ausein, TX, officeholder living expense Fuel for party chairman Office held Date 04/11/2025 Payee name 04/11/2025 Amount (\$) Payee address; City; State; Zip Code 2465 FM 1092 Rd Missouri City, TX 77459 Purpose OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Shell Service Station Amount (\$) Payee address; City; State; Zip Code 2465 FM 1092 Rd Missouri City, TX 77459 Purpose OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Travel In District (b) Description Check if Ausein, TX, officeholder living expense Fuel for chairman to travel in district Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Fuel for party chairman							
Date 03/24/2025 Amount (\$) Payee address; City; State; Zip Code 2465 FM 1092 Rd Missouri City, TX 77459 PURPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office held Payee andress; City; State; Zip Code Office held Description Check if Ausein, TX, officeholder living expense Fuel for party chairman Office held Date 04/11/2025 Payee name 04/11/2025 Amount (\$) Payee address; City; State; Zip Code 2465 FM 1092 Rd Missouri City, TX 77459 Purpose OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Shell Service Station Amount (\$) Payee address; City; State; Zip Code 2465 FM 1092 Rd Missouri City, TX 77459 Purpose OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Travel In District (b) Description Check if Ausein, TX, officeholder living expense Fuel for chairman to travel in district Complete ONLY if direct Candidate/Officeholder name Office sought Office held										
Date 03/24/2025 Amount (\$) Payee address; City; State; Zip Code \$64.40 \$64.40 Payee address; City; State; Zip Code 2465 FM 1092 Rd Missouri City, TX 77459 PURPOSE OF EXPENDITURE (a) Category (see categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for party chairman Complete QNLY if direct expenditure to benefit C/OH Date 04/11/2025 Amount (\$) Payee name 35el.34 Amount (\$) Payee address; City; State; Zip Code 362.34 Missouri City, TX 77459 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Travel In District (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Rustin, TX, officeholder living expense Fuel for chairman to travel in district Complete QNLY if direct Candidate/Officeholder name Office sought Office held	9									
Shell Service Station		expenditure to benefit C/OI	1							
Amount (\$) Payee address; City; State; Zip Code 2465 FM 1092 Rd Missouri City, TX 77459 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Travel In District Complete ONLY if direct expenditure to benefit C/OH Date 04/11/2025 Amount (\$) Payee name 04/11/2025 Shell Service Station Amount (\$) Payee address; City; State; Zip Code 2465 FM 1092 Rd Missouri City, TX 77459 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for chairman to travel in district Complete QNLY if direct Candidate/Officeholder name Office sought Office held		Date	Payee name							
### Se4.40 ### Se4.40 ### Alloy2 Rd ### Missouri City, TX 77459 Candidate / Office holder name	L	03/24/2025	Shell Service Station							
Missouri City, TX 77459 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for party chairman Complete ONLY if direct expenditure to benefit C/OH Date 04/11/2025 Amount (\$) Payee name Shell Service Station Amount (\$) Payee address; City; State; Zip Code 2465 FM 1092 Rd Missouri City, TX 77459 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Description Check if Austin, TX, officeholder Iving expense Fuel for chairman to travel in district Complete ONLY if direct Candidate/Officeholder name Office sought Office held		Amount (\$)	Payee address; City; State; Zip Code							
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if Austin, TX, officeholder I. Check if Austin, TX, officeholder living expense Fuel for party chairman Complete ONLY if direct expenditure to benefit C/OH Date 04/11/2025 Amount (\$) Payee name Shell Service Station Amount (\$) Payee address; City; State; Zip Code \$62.34 Missouri City, TX 77459 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held Office held Office held		\$64.40	2465 FM 1092 Rd							
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if Austin, TX, officeholder I. Check if Austin, TX, officeholder living expense Fuel for party chairman Complete ONLY if direct expenditure to benefit C/OH Date 04/11/2025 Amount (\$) Payee name Shell Service Station Amount (\$) Payee address; City; State; Zip Code \$62.34 Missouri City, TX 77459 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held Office held Office held										
Travel In District Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			Missouri City, TX 77459							
Complete ONLY if direct expenditure to benefit C/OH										
Complete ONLY if direct expenditure to benefit C/OH Date O4/11/2025 Shell Service Station Amount (\$) Payee address; City; State; Zip Code \$62.34 S62.34 Payee address; City; State; Zip Code \$62.34 Office Sought			Travel in District							
Complete ONLY if direct expenditure to benefit C/OH Date										
Date 04/11/2025 Shell Service Station Amount (\$) Payee address; City; State; Zip Code 2465 FM 1092 Rd Missouri City, TX 77459 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for chairman to travel in district Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Fuer for party Chairman							
Date 04/11/2025 Shell Service Station Amount (\$) Payee address; City; State; Zip Code 2465 FM 1092 Rd Missouri City, TX 77459 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for chairman to travel in district Complete ONLY if direct Candidate/Officeholder name Office sought Office held	_	Complete ONLY if alice -t	Condidate/Officeholder name Office cought							
Amount (\$) Payee address; City; State; Zip Code \$62.34 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for chairman to travel in district Complete ONLY if direct Candidate/Officeholder name Office sought Office held			· · · · · · · · · · · · · · · · · · ·							
Amount (\$) Payee address; City; State; Zip Code \$62.34 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for chairman to travel in district Complete ONLY if direct Candidate/Officeholder name Office sought Office held	_	Data	David waren							
Amount (\$) Payee address; City; State; Zip Code 2465 FM 1092 Rd Missouri City, TX 77459 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for chairman to travel in district Complete ONLY if direct Candidate/Officeholder name Office sought Office held										
\$62.34 2465 FM 1092 Rd Missouri City, TX 77459 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for chairman to travel in district Complete ONLY if direct Candidate/Officeholder name Office sought Office held										
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for chairman to travel in district Complete ONLY if direct Candidate/Officeholder name Office sought Office held		` ,								
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for chairman to travel in district Complete ONLY if direct Candidate/Officeholder name Office sought Office held		\$62.34	2465 FM 1092 Rd							
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for chairman to travel in district Complete ONLY if direct Candidate/Officeholder name Office sought Office held										
Travel In District Check if travel outside of Texas. Complete Schedule T.	L		Missouri City, TX 77459							
Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for chairman to travel in district Complete ONLY if direct Candidate/Officeholder name Office sought Office held			(a) Category (See Categories listed at the top of this schedule) (b) Description							
Complete ONLY if direct Candidate/Officeholder name			Travel In District Check if travel outside of Texas. Complete Schedule T.							
Complete ONLY if direct Candidate/Officeholder name Office sought Office held										
			Fuel for chairman to travel in district							
		Complete ONLY if direct	Condidate/Officeholder name Office cought							
		,								

SCHEDULE F1

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

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

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/30 Rpt: 29/36	Republican Party of Fort Bend County (CEC) 00037828
4	Date	5 Payee name
	04/28/2025	Shell Service Station
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$63.97	2465 FM 1092 Rd
		Missouri City, TX 77459
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fuel for chairman to travel in district
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/23/2025	Shell Service Station
	Amount (\$)	Payee address; City; State; Zip Code
	\$74.25	2465 FM 1092 Rd
		Missouri City, TX 77459
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Fuel for chairman to travel in district
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	U
	Date	Dougo nama
	01/22/2025	Payee name Spectators
	Amount (\$)	Payee address; City; State; Zip Code
	\$810.00	18822 W Airport Blvd #700
	Ψ010.00	10022 W Allport Blvd #700
		Richmond, TX 77406
	PURPOSE	<u> </u>
	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Presidential inauguration event expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	onpolitical of bolicing 0/01	•

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/30 Rpt: 30/36	Republican Party of Fort Bend County (CEC) 00037828
4	Date	5 Payee name
	04/22/2025	Stryk, Debbi
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$161.90	1005 Foster Dr.
		Richmond, TX 77469
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		2025 LRD expense reimbursement for supplies
Ļ	Complete ONLY if direct	Condidate Office holder years Office county
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	Data	
	Date	Payee name
	02/04/2025	Sugar Land Locksmith
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	11557 S Texas 6
		Sugar Land, TX 77498
	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
		Locksmith to change out locks at office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
Г	Date	Payee name
	01/13/2025	TemplateDiscount
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$125.00	6652 US-79
		Hutto, TX 78634
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Website Maintenance Expense
L	Complete ONII V if direct	Condidate/Officeholder name Office country
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 25/30 Rpt: 31/36	Republican Party of Fort Bend County (CEC) 00037828							
4	Date	5 Payee name							
	01/16/2025	TemplateDiscount							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$570.00	6652 US-79							
		Hutto, TX 78634							
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 Website Maintenance Expense							
		Website Maintenance Expense							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O								
F	Date	Payee name							
	02/12/2025	TemplateDiscount							
H	Amount (\$)	Payee address; City; State; Zip Code							
	\$125.00	6652 US-79							
		Hutto, TX 78634							
	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 Website Maintenance Expense							
		Woodie mantonario Espondo							
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O								
F	Date	Payee name							
	02/18/2025	TemplateDiscount							
Г	Amount (\$)	Payee address; City; State; Zip Code							
	\$2,000.00	6652 US-79							
		Hutto, TX 78634							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Advertising Expense							
		Check if Austin, TX, officeholder living expense							
		Website revamp expense							
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O								
\vdash									

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		
1	Total pages Schedule F1:	
	Sch: 26/30 Rpt: 32/36	Republican Party of Fort Bend County (CEC) 00037828
4	Date	5 Payee name
	03/06/2025	TemplateDiscount
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$285.00	6652 US-79
		Hutto, TX 78634
_	DUDDOCE	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Website Maintenance Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Payee name
	03/12/2025	TemplateDiscount
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.00	6652 US-79
		Hutto, TX 78634
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Website Maintenance expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit of or	'
	Date	Payee name
	03/31/2025	TemplateDiscount
	Amount (\$)	Payee address; City; State; Zip Code
	\$285.00	6652 US-79
		Hutto, TX 78634
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Website Maintenance Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<u> </u>

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Finding Expense Salaries/Manes/Contract Labor

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 27/30 Rpt: 33/36	Republican Party of Fort Bend County (CEC) 00037828
4	Date	5 Payee name
	04/14/2025	TemplateDiscount
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$125.00	6652 US-79
		Hutto TV 79624
	DUDDOCE	Hutto, TX 78634
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Website fees
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit 6/61	<u>'</u>
	Date	Payee name
	04/30/2025	TemplateDiscount
	Amount (\$)	Payee address; City; State; Zip Code
	\$285.00	6652 US-79
		Hutto, TX 78634
	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 Website maintenance fee
		Website maintenance ree
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/12/2025	TemplateDiscount
	Amount (\$)	Payee address; City; State; Zip Code
	\$280.00	6652 US-79
	,	
		Hutto, TX 78634
	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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Website Maintenance fee
	Complete ONII V if allower	Condidate/Officeholder name Office south
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Services			/ages	/Contract Labor		OTHER (enter	a category not listed	above)	
				The Instruction (Guide explains l	how to co	mple	ete this form.					
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Comm	ission Filers)	
	Sch: 28/30 Rpt: 34/36		Republican	Party of Fort E	Bend County	(CEC)				00037828			
4	Date	5	Payee name										
	05/13/2025		TemplateDis	scount									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de						
	\$125.00		6652 US-79										
			Hutto, TX 78	3634									
_	PURPOSE	⊢					(h)	5 12					
8	OF			ee Categories listed a	the top of this scho	edule)	(D)	Description	nutei	de of Teyes Cor	nplete Schedule T.		
	EXPENDITURE		Advertising	Expense						officeholder livir	•		
								Website Mair	nter	nance Fee			
9	Complete ONLY if direct		Candidate/Offic	ceholder name	C	Office sou	ght			Office h	neld		
	expenditure to benefit C/OI	Н											
H	Date		Payee name										
	05/30/2025		TemplateDis	scount									
	Amount (\$)		Payee addres	ss; City;	State:	Zip Co	de						
	\$285.00	ı	6652 US-79		Otato,	p 00							
	4200.00		0002 00 10										
			Hutto, TX 78	2624									
	DURROSE	⊢					(1-)						
	PURPOSE OF			ee Categories listed at	the top of this scho	edule)	(D)	Description Check if travel (nutei	de of Teyes Cor	mnlete Schedule T		
	EXPENDITURE	/ divertising Expense					=	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
			Website N					Website Mair	ite Maintenance Fee				
	Complete ONLY if direct		Candidate/Offic	ceholder name	C	Office sou	ght			Office h	neld		
	expenditure to benefit C/OI	Н											
	Date		Payee name										
	06/13/2025		TemplateDis	scount									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de						
	\$125.00		6652 US-79)									
			Hutto, TX 78	3634									
	PURPOSE	⊢		ee Categories listed at			(h)	Description					
	OF		Advertising		the top of this sch	eauie)	()		outsi	de of Texas. Cor	mplete Schedule T.		
	EXPENDITURE		7 tavertising	Ехрепос				Check if Austin,	, TX,	officeholder livir	ng expense		
								Website Mair	nter	nance Fee			
	Complete ONLY if direct		Candidate/Offic	ceholder name	C	Office sou	ght			Office h	neld		
L	expenditure to benefit C/O	H 											

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

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

	Credit Cara r ayment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 29/30 Rpt: 35/36	Republican Party of Fort Bend County (CEC)		00037828
4	Date	5 Payee name		
	06/23/2025	TemplateDiscount		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
	\$107.17	6652 US-79		
		Hutto, TX 78634		
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
				Website Maintenance fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ight	Office held
	expenditure to benefit C/O		J	
	Date	Payee name		
	06/30/2025	TemplateDiscount		
-	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$285.00	6652 US-79		
		Hutto, TX 78634		
	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 Website Maintenance fee	
				Website Maintenance ree
-	Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ıaht	Office held
	expenditure to benefit C/O		9	
	Date	Payee name		
	02/05/2025	Texaco		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$63.77	24985 Katy Fwy		
		Katy, TX 77494		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District	``	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Fuel for Party Chairman expense
	Complete ONII V if direct	Candidate/Officeholder name Office sou	L Cab +	Office hald
	Complete ONLY if direct expenditure to benefit C/Ol		ignt	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	ıı Cor	The Instruction Guide explains how to co		ete this form.	ОТН	=R (enter a	category not listed abov	e)
1	Total pages Schedule F1:	2	FILER NAME		[:	3 Filer	· ID	(Ethics Commission	n Filers)
	Sch: 30/30 Rpt: 36/36		Republican Party of Fort Bend County (CEC)			000	37828		
4	Date	5	Payee name		•				
l	05/01/2025		Texas Secretary of State						
6	Amount (\$) \$23,200.00	7	Payee address; City; State; Zip Co P.O. Box 12887	de					
l			Austin, TX 78711						
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) For TX SOS	(b)	Check if Austin,	TX, officel	nolder living	plete Schedule T. expense Primary Fund B	alance
9	Complete ONLY if direct expenditure to benefit C/O	Η (Candidate/Officeholder name Office sou	ght			Office he	eld	
ſ	Date		Payee name						
l	04/11/2025		The Phoenix Design Group						
	Amount (\$) \$12,777.52		Payee address; City; State; Zip Co 4850 Wright Road	de					
			Stafford, TX 77477						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Event Expense	(b)	Description Check if travel ou Check if Austin, 2025 LRD exp	TX, officel	nolder living		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office sou	ght			Office he	eld	