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. 15 00031663 3 COMMITTEE NAME **OFFICE USE ONLY** Cooke County Republican Party (CEC) Date Received **ELECTRONICALLY FILED** 07/09/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 701 E. California, Ste. 304 Date Hand-delivered or Date Postmarked Gainesville, TX 76240 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Mary NAME NICKNAME LAST **SUFFIX** Lewis STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 6087 FM 1201 STREET **ADDRESS** (Residence or Business) Gainesville, TX 76240 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 270 MAILING **ADDRESS** Lindsay, TX 76250 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (940) 665-0330 PHONE REPORT January 15 30th day before election Final Report **TYPE** 10th day after campaign treasurer 8th day before election 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

2 COMMITTEE NAME			13 File	r ID	(Ethics Commission Filers)
Cooke County Republic	Cooke County Republican Party (CEC)				
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	I		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
5 CONTRIBUTION TOTALS	PLEDGES, LOAN CONTRIBUTIONS	ED POLITICAL CONTRIBUTIONS (OTI S, OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) ort qualifies for the higher itemization threshol		\$	4,901.94
		AL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES (OF LOANS)	\$	13,863.54
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITION	AL EXPENDITURES		\$	6,838.11
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT	CONTRIBUTIONS MAINTAINED AS C NG PERIOD	OF THE LAST DAY	\$	29,333.83
OUTSTANDING LOAN TOTALS		L AMOUNT OF ALL OUTSTANDING LO E REPORTING PERIOD	OANS AS OF THE	\$	0.00
6 AFFIDAVIT	l			<u> </u>	
		I swear, or affirm, unde true and correct and inc under Title 15, Election	cludes all information		
			Mrs. Mary Lev	wis	
		S	ignature of Campaign		rer
AFFIX NOTARY	/ STAMP / SEAL ABOV	≣			
					day
of	_, 20, to certi	y which, witness my hand and seal of of	ffice.		
Signature of officer ac	dministering oath	Printed name of officer administering	oath Title	e of offic	er administering oath

SUBTOTALS - CEC

FORM CEC COVER SHEET PG 3

					3 of 15
17 CC	MMITTE	EE NAME	18 Filer ID	(Ethic	cs Commission Filers)
Co	oke Co				
19 SC	HEDULI	E SUBTOTALS			SUBTOTAL AMOUNT
NA	ME OF	SCHEDULE		<u> </u>	SOBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	13,161.54
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	702.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$	6,838.11
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
10.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUI	E A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/4 Rpt: 4/15	
2	FILER NAME Cooke Coun	ty Republican Party (CEC)		3	Filer ID (Ethics Commission 00031663	on Filers)
4			7	Amount of Contribution (\$)	\$350.00	
_		Fort Worth, TX 76112				
8	Principal occu Judge	pation / Job title (See Instructions)	9 Employer (See Instructions State of Texas)		
	Date Full name of contributor out-of-state PAC (ID#:) Bonn, Michael Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$273.75	
	Dringing aggr	Gainesville, TX 76240	Employer (See Instructions			
Principal occupation / Job title (See Instructions) Retired Employer (See Instruction)				
Date 03/31/2025 		Full name of contributor out-of-state PAC (ID#:) Brent Hagenbuch Campaign Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$367.50
		Denton, TX 76210				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/05/2025	Full name of contributor out-of-state PAC (ID#:_ Cooke County Republican Women Contributor address; City; State; Zip Code Gainesville, TX 76240			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/04/2025	Full name of contributor out-of-state PAC (ID#:_ Drew Springer for Texas Contributor address; City; State; Zip Code Muenster, TX 76252			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUI	LE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/4 Rpt: 5/15	
2	FILER NAME Cooke Coun	ty Republican Party (CEC)		3	Filer ID (Ethics Commission 00031663	on Filers)
4	4 Date 03/24/2025 5 Full name of contributor out-of-state PAC (ID#:) 7 Hogan, Robert 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00	
_		Gainesville, TX 76240				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions))		
Date Full name of contributor out-of-state PAC (ID#:) 01/28/2025 Lesch, Pauline (Mrs.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00		
	Valley View, TX 76272-6914 Principal occupation / Job title (See Instructions) Employer (See Instructions))			
Date Full name of contributor out-of-state PAC (ID#: 02/18/2025 Lewis, Dorthy (Mrs.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Gainesville, TX 76240 pation / Job title (See Instructions)	Employer (See Instructions retired)		
Date Full name of contributor out-of-state PAC (ID#: 02/18/2025 Little, Pam Contributor address; City; State; Zip Code Fairview, TX 75069)		Amount of Contribution (\$)	\$250.00	
	Principal occu SOBE Memb	pation / Job title (See Instructions) per	Employer (See Instructions Elected)		
	Date 01/28/2025	Full name of contributor out-of-state PAC (ID#:_ Marchant Good Goverernment Fund Contributor address; City; State; Zip Code Carrollton, TX 75006)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/4 Rpt: 6/15	
2	FILER NAME Cooke Coun	ty Republican Party (CEC)		3	Filer ID (Ethics Commission 00031663	on Filers)
4	Date 03/05/2025 5 Full name of contributor out-of-state PAC (ID#:) Smith, Bob 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$273.75	
_	Gainesville, TX 76240 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)					
8	Owner	pation / Job title (See Instructions)	Self-Employed)		
Date Full name of contributor out-of-state PAC (ID#:) 03/05/2025 Tillman, Calvan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$273.75		
Valley View, TX 76272 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Employer (See Instructions)			
Manager Employer						
Date 04/12/2025		Full name of contributor out-of-state PAC (ID#:) Tri Dal LLC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Grapevine, TX 76092				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/12/2025	Full name of contributor out-of-state PAC (ID#:_ Weckar, David Contributor address; City; State; Zip Code Krum, TX 76249			Amount of Contribution (\$)	\$449.10
	Principal occu Self-Empolye	pation / Job title (See Instructions) ed	Employer (See Instructions HVAC)		
	Date 03/05/2025	Full name of contributor out-of-state PAC (ID#:_ Womack, Richard Contributor address; City; State; Zip Code Valley View, TX 76272			Amount of Contribution (\$)	\$273.75
	Principal occu Project Mana	pation / Job title (See Instructions) ager	Employer (See Instructions Saulsbury Industries)		

The Instruction Guide explains how to complete this form. 2 FILER NAME Cooke County Republican Party (CEC) 00	
Cooke County Republican Party (CEC) 4 Date	al pages Schedule A1: h: 4/4 Rpt: 7/15
4 Date 04/12/2025 5 Full name of contributor out-of-state PAC (ID#:) 7 Am Zielinski, Ed (The Honorable) 6 Contributor address; City; State; Zip Code Gainesville, TX 76240 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	er ID (Ethics Commission Filers)
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	ount of Contribution (\$) \$450.00

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 8/15 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Cooke County Republican Party (CEC) 00031663 \$ 202.00 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 04/12/2025 Bartusch, Chuck (Mr.) \$500.00 Awards, misc door prizes 7 Contributor address; City; State; Zip Code Muenster, TX 76240 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) self employed Attorney 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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

	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: 1/7 Rpt: 9/15	Cooke County Republican Party (CEC) 00031663
4	Date	5 Payee name
	01/06/2025	Abba Women's Center
6	Amount (\$) \$361.00	7 Payee address; City; State; Zip Code 214 North Taylor Gainesville, TX 76240
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Charitable Contribution
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/15/2025	Dieter Brothers Restaurant
	Amount (\$)	Payee address; City; State; Zip Code
	\$487.13	401 E. Hwy. 82
		Lindsay, TX 76250
	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
		BYOG Food
		B1001000
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit 6/61	
	Date	Payee name
	01/28/2025	Engie Energy
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.91	PO Box 84160
		Dallas, TX 75284-1680
	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
		Office Electricity
		Office Electricity
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/7 Rpt: 10/15	Cooke County Republican Party (CEC) 00031663
4	Date	5 Payee name
	02/26/2025	Engie Energy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$17.48	PO Box 84160
		Dallas, TX 75284-1680
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Office Electricity
_	Complete ONLY if direct	Condidate/Office holds
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_		
	Date	Payee name
	04/01/2025	Engie Energy
	Amount (\$)	Payee address; City; State; Zip Code
	\$23.02	PO Box 84160
		Dallas, TX 75284-1680
	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 Office Electricity
		Office Electricity
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	Para a sana
	Date	Payee name
	04/30/2025	Engie Energy
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.77	PO Box 84160
L		Dallas, TX 75284-1680
	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 Office Electricity
		Office Liectricity
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	s)
	Sch: 3/7 Rpt: 11/15	Cooke County Republican Party (CEC) 00031663	-,
4	Date	5 Payee name	
	05/29/2025	Engie Energy	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$21.77	PO Box 84160	
		Dallas, TX 75284-1680	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Check if Austin, TX, officeholder living expense	
		Office Electricity	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
١	expenditure to benefit C/OI		
	Date	Payee name	
	04/15/2025	Fossil Pointe	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	7282 N. FM 51	
		Decataur, TX 76234	
	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	
		Event Venue Deposit	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
		<u> </u>	
	Date	Payee name	
	04/15/2025	Fossil Pointe	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,330.39	7282 N. FM 51	
		Decataur, TX 76234	
-	PURPOSE		
	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	
		Event Venue	
L			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit C/OI	H	

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 - Git/Awards/Memoriais Expense Printing Expense Travel Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a categor				ve)					
	ordan dara r dyment		The Instruction Gu	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NA	AME				3	Filer ID	(Ethics Commission	n Filers)
	Sch: 4/7 Rpt: 12/15	Cooke C	County Republican F	Party (CEC)				00031663		
4	Date	5 Payee na	ıme							
	01/07/2025	Lesch, F	Pauline (Mrs.)							
6	Amount (\$)	7 Payee ac	Idress; City;	State; Zip Co	ode					
	\$301.22	418 CR	204							
		Valley V	iew, TX 76272							
8	PURPOSE	(a) Category	(See Categories listed at th	ne ton of this schedule)	(b)	Description				
	OF	Event Ex		ic top of this sericulary	``		outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE					Check if Austin	, TX,	officeholder living	g expense	
						Swearing in C	Cer	emony		
9	Complete ONLY if direct expenditure to benefit C/OH		Officeholder name	Office sou	ıght			Office h	eld	
	experionality to benefit C/O	1								
	Date	Payee na	ıme							
	04/23/2025	Lesch, F	Pauline (Mrs.)							
	Amount (\$)	Payee ac	ldress; City;	State; Zip Co	ode					
	\$144.10	418 CR	204							
		Valley V	iew, TX 76272							
	PURPOSE	(a) Category	(See Categories listed at th	ne top of this schedule)	(b)	Description				
	OF EXPENDITURE	Event Ex		,		Check if travel	outsi	de of Texas. Con	plete Schedule T.	
	LXFLINDITORL					—		officeholder living	g expense	
						BYOG Expen	ıse			
					<u> </u>					
	Complete ONLY if direct expenditure to benefit C/OI		Officeholder name	Office sou	ıght			Office h	eld	
	Date	Payee na								
	01/06/2025	McNama	ara, Chris							
	Amount (\$)	Payee ad	Idress; City;	State; Zip Co	ode					
	\$1,000.00	102 CR	2130							
		Gainesv	ille, TX 76240-6338	1						
	PURPOSE	(a) Category	(See Categories listed at th	ne top of this schedule)	(b)	Description				
	OF EXPENDITURE	Travel C	out of District			ш			plete Schedule T.	
	EXI ENDITORE							officeholder living		
						Reimburseme	ent	tor Out of E	istrict i ravel	
_	Operation ONE V. C. P.	0 !! ! :	10#: I I-I	0.00				O''' :	-1-1	
	Complete ONLY if direct expenditure to benefit C/OI		Officeholder name	Office sou	ıgnt			Office h	eia	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 5/7 Rpt: 13/15	Cooke County Republican Party (CEC) 00031663
4	Date	5 Payee name
	01/01/2025	Nortex Communications
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$91.58	205 North Walnut St.
		Muenster, TX 76252
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 website and phone
		Website that priorie
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	the state of the s
H	Date	Payee name
	02/10/2025	Nortex Communications
	Amount (\$)	Payee address; City; State; Zip Code
	\$91.58	205 North Walnut St.
	Ψ31.30	200 North Wallat St.
		Muoneter TV 76353
L		Muenster, TX 76252
	PURPOSE OF	(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.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		website and phone
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/10/2025	Nortex Communications
	Amount (\$)	Payee address; City; State; Zip Code
	\$91.58	205 North Walnut St.
		Muenster, TX 76252
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		website and phone
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		
1		

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
	Sch: 6/7 Rpt: 14/15	Cooke County Republican Party (CEC) 00031663		
4	Date	5 Payee name		
	04/10/2025	Nortex Communications		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$107.11	205 North Walnut St.		
		Muenster, TX 76252		
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		
		website and phone		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O	'		
	Date	Payee name		
	05/13/2025	Nortex Communications		
Amount (\$) Payee address; City; State; Zip Code				
	\$92.11	205 North Walnut St.		
		Muenster, TX 76252		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Office Overhead/Rental Expense		
		Check if Austin, TX, officeholder living expense website and phone		
		website and priorie		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·		
	Date	Payee name		
	06/10/2025	Nortex Communications		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$92.11	205 North Walnut St.		
		Muenster, TX 76252		
	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		
		website and phone		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/Ol			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/7 Rpt: 15/15	Cooke County Republican Party (CEC) 00031663
4	Date	5 Payee name
	04/16/2025	Raise the Money
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$94.85	801 E. California St.
		Gainesville, TX 76240
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Bank Charges
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	
	Date	Payee name
	04/18/2025	Signs for Less
	Amount (\$)	Payee address; City; State; Zip Code
	\$779.40	306 North Grand Avenue
		Gainesville, TX 76240
	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
		BYOG Signs
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH		
	Date	Payee name
	03/19/2025	Texas Star Embroidery
	Amount (\$)	Payee address; City; State; Zip Code
	\$168.00	402 S Lindsay St
		GAINESVILLE, TX 76240
	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 BYOG Hats
		Broomas
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	