FORM PTY-CORP POLITICAL PARTY REPORT REGARDING FUNDS FROM CORPORATIONS AND LABOR ORGANIZATIONS **COVER SHEET PG 1** Filer ID 2 Total pages filed The Form PTY-CORP Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00023668 3 POLITICAL PARTY Atascosa County Republican Party (P) **OFFICE USE ONLY** NAME Date Received STATE OR COUNTY **ELECTRONICALLY FILED** State **PARTY** 06/30/2025 X County: Atascosa POLITICAL PARTY Democrat **TYPE** Republican Libertarian Other: Date Hand-delivered or Date Postmarked (Party name) Receipt # Amount POLITICAL PARTY ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE MAILING ADDRESS 3100 FM 1784 Date Processed Pleasanton, TX 78064 Date Imaged POLITICAL PARTY TITLE **FIRST** NICKNAME LAST **SUFFIX** ΜI **CHAIR** Robert Duncan **CHAIR MAILING** ADDRESS / PO BOX; STATE: ZIP CODE APT / SUITE #; CITY; **ADDRESS** 3100 FM 1784 Pleasanton, TX 78064 CHAIR STREET STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **ADDRESS** 3100 FM 1784 (Residence or Business) Pleasanton, TX 78064 PHONE NUMBER **10** CHAIR PHONE AREA CODE **EXTENSION** (210) 416-2554 11 REPORT TYPE January 15 8th day before primary election X July 15 50th day before general election 12 PERIOD COVERED Month Day Year Month Day Year **THROUGH** 01/01/2025 06/30/2025

FORM PTY-CORP **POLITICAL PARTY REPORT: TOTALS AND AFFIDAVIT COVER SHEET PG 2** 14 Filer ID 13 POLITICAL PARTY NAME (Ethics Commission Filers) 00023668 Atascosa County Republican Party (P) 15 TOTALS 1. TOTAL CONTRIBUTIONS FROM CORPORATE OR LABOR **ORGANIZATIONS** \$ 0.00 (OTHER THAN LOANS OR GUARANTEES OF LOANS) 2. TOTAL EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS \$ 3.23 3. TOTAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 380.38 A political party must file a report on FORM PTY-CORP for any reporting period during which the party accepts corporate or labor organization contributions, maintains corporate or labor organization contributions, or makes expenditures from corporate or labor organization contributions. 16 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Robert Duncan Signature of Political Party Chair

AFFIX NOTARY STAMP / SEAL

| Sworn to and subscribed before r | , this the | day | |
|----------------------------------|---|-----------------------------|------------------|
| of, 20 | , to certify which, witness my hand and seal of c | office. | |
| | | | |
| | | | |
| | | | |
| Signature of officer administeri | ing oath Printed name of officer administering | g oath Title of officer adn | ninistering oath |

FORM PTY-CORP **SUBTOTALS - PTYCORP COVER SHEET PG 3** 3 of 4 17 POLITICAL PARTY NAME 18 Filer ID (Ethics Commission Filers) Atascosa County Republican Party (P) 00023668 19 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR \$ **ORGANIZATION** SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR 2. \$ LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$ 3. SCHEDULE E: LOANS \$ SCHEDULE F1: EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION 5. X 3.23 \$ **CONTRIBUTIONS** SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$

EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solarios (Contract Labor, Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

| | Candidate/Officeholder/Politica Credit Card Payment | l Cor | nmittee Legal Services The Instruction Guide | | | es/Contract Labor lete this form. | | OTHER (enter a | category not listed above) | |
|---|--|-------|---|------------|--------|-----------------------------------|-------|-------------------|----------------------------|---|
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 3 | Filer ID | (Ethics Commission Filers) |) |
| | Sch: 1/1 Rpt: 4/4 | | Atascosa County Republican | Party (P) | | | | 00023668 | | |
| 4 | Date | 5 | Payee name | | | | | | | |
| | 01/20/2025 | _ | Reliant Energy | | | | | | | |
| 6 | Amount (\$) | | Payee address; City; | State; Zip | Code | | | | | |
| | \$3.23 | | P.O. Box 650475 | | | | | | | |
| Х | Expenditure from | | | | | | | | | |
| | - corporate rands | _ | Dallas, TX 75265-0475 | | (16) | <u> </u> | | | | |
| 8 | PURPOSE OF | | Category (See Categories listed at the t Office Overhead/Rental Expe | | (a) | Description Check if travel o | outsi | de of Texas. Comp | olete Schedule T. | |
| | EXPENDITURE | | Office Overfleau/Refliai Expe | 1150 | | Ш | | | | |
| | | | | | | utility bill | | | | |
| | | | | | | | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | | Candidate/Officeholder name | Office s | sought | - | | Office he | ld | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |