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. 00080082 3 COMMITTEE NAME **OFFICE USE ONLY** San Jacinto County Republican Party Date Received **ELECTRONICALLY FILED** 07/11/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 370 Date Hand-delivered or Date Postmarked Coldspring, TX 77331 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** George NAME NICKNAME LAST **SUFFIX** Garrett STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 201 Robin Creek Rd. STREET **ADDRESS** (Residence or Business) Coldspring, TX 77331 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 201 Robin Creek Rd. MAILING **ADDRESS** Coldspring, TX 77331 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (832) 221-0019 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

| 12 COMMITTEE NAME | | | 13 Filer ID | (Ethics Commission Filers) |
|---|---|--|---------------|----------------------------|
| San Jacinto County Re | publican Party | | 00080082 | |
| 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 | | |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | |
| 15 CONTRIBUTION TOTALS | PLEDGES, LOAN CONTRIBUTIONS | ED POLITICAL CONTRIBUTIONS (OTHER THAN S, OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) ort qualifies for the higher itemization threshold | \$ | 0.00 |
| | | CAL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 29,205.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZ | ED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITION | CAL EXPENDITURES | \$ | 0.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICA OF THE REPORT | L CONTRIBUTIONS MAINTAINED AS OF THE LAST ING PERIOD | DAY \$ | 27,727.04 |
| OUTSTANDING LOAN TOTALS | 1 | L 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 pe true and correct and includes all informunder Title 15, Election Code. | | |
| | | George | e Garrett | |
| | | Signature of Car | | ırer |
| AFFIX NOTARY | STAMP / SEAL ABOV | E | | |
| Sworn to and subscribed | before me, by the said | , tł | 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 offi | cer administering oath |

SUBTOTALS - CEC FORM CEC **COVER SHEET PG 3** 18 Filer ID **17** COMMITTEE NAME (Ethics Commission Filers) San Jacinto County Republican Party 00080082 19 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 29,205.00 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 3. SCHEDULE E: LOANS \$ 5. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 16,471.62 SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 10. \$ TO FILER

| | MONET | ARY POLITICAL (| CONTRIBUTIO | NS | | SCHEDU | LE A1 |
|---|---------------------------|--|-------------------------|---------------------------------------|-----------|--|--------------|
| | The Instru | ction Guide explains hov | to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 1/6 Rpt: 4/24 | |
| 2 | FILER NAME San Jacinto | County Republican Party | | | 3 | Filer ID (Ethics Commission 00080082 | on Filers) |
| 4 | Date 02/22/2025 | 5 Full name of contributor Alabama-Coushata Tribe6 Contributor address; City; S | out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | \$2,500.00 |
| Ω | Principal occu | Livingston, TX 77351 pation / Job title (See Instructions | .) | Employer (See Instructions | ;) | | |
| _ | i ilicipai occu | pation 7 oob tide (See manuchons | " | 2 Employer (See Instructions | •) | | |
| | Date 02/23/2025 | Full name of contributor Arizpe, Charissa Contributor address; City; S | | | | Amount of Contribution (\$) | \$1,550.00 |
| | Dringinal occu | Coldspring, TX 77331 | .) | Employer (See Instructions | <u>''</u> | | |
| | Retired | pation / Job title (See Instructions |) | Employer (See Instructions Retired | ·) | | |
| | Date 02/22/2025 | Full name of contributor Arizpe, Charissa Contributor address; City; S | out-of-state PAC (ID#: | | • | Amount of Contribution (\$) | \$1,000.00 |
| | Deinsinal assu | Coldspring, TX 77331 | | Franksian (Cook lastin ations | <u></u> | | |
| | Retired | pation / Job title (See Instructions |) | Employer (See Instructions Retired | ») | | |
| | Date 02/22/2025 | Full name of contributor Arizpe, Steve (Mr.) Contributor address; City; S Coldspring, TX 77331 | |) | • | Amount of Contribution (\$) | \$550.00 |
| | Principal occu Manager | pation / Job title (See Instructions | s) | Employer (See Instructions Inspirity | 5) | | |
| | Date 02/22/2025 | Full name of contributor Bank of San Jacinto Cour Contributor address; City; S Coldspring, TX 77331 | - |) | • | Amount of Contribution (\$) | \$3,000.00 |
| | Principal occu | pation / Job title (See Instructions | s) | Employer (See Instructions | 5) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL C | ONTRIBUTIO | NS | | SCHEDUI | LE A1 |
|---|---------------------------|--|-------------------------|--|---------|--|--------------|
| | The Instru | ction Guide explains how | to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 2/6 Rpt: 5/24 | |
| 2 | FILER NAME San Jacinto | County Republican Party | | | 3 | Filer ID (Ethics Commission 00080082 | on Filers) |
| 4 | Date 02/22/2025 | 5 Full name of contributor Berger, Johnnie (Mr.)6 Contributor address; City; St | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$650.00 |
| _ | Deignaignal | Coldspring, TX 77331 | , I | O Frankrija (Cas krativijationa | | | |
| 8 | Retired | pation / Job title (See Instructions |) | 9 Employer (See Instructions | 5) | | |
| | Date 02/22/2025 | Full name of contributor Berger, Johnnie (Mr.) Contributor address; City; St | | | | Amount of Contribution (\$) | \$400.00 |
| | Deinsinal assu | Coldspring, TX 77331 | , T | Franks var (Caa Instructions | <u></u> | | |
| | Retired | pation / Job title (See Instructions |) | Employer (See Instructions | 5) | | |
| | Date 02/22/2025 | Full name of contributor Booth, Richard Contributor address; City; St | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | \$125.00 |
| | | PointBlank, TX 77364 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions | | Employer (See Instructions Retired | 5) | | |
| | Date 02/22/2025 | Full name of contributor Clark, Patrick Contributor address; City; St | | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu Manager | pation / Job title (See Instructions |) | Employer (See Instructions Eastex Title | 5) | | |
| | Date 02/22/2025 | Full name of contributor Clark, Patrick Contributor address; City; St | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | \$1,900.00 |
| | Principal occu Manager | pation / Job title (See Instructions | | Employer (See Instructions Eastex Title | 5) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL C | ONTRIBUTION | S | | SCHEDUI | E A1 |
|---|----------------------------------|---|------------------------|---|----------|--|------------|
| | The Instru | ction Guide explains how t | to complete this forr | n. | 1 | Total pages Schedule A1: Sch: 3/6 Rpt: 6/24 | |
| 2 | FILER NAME San Jacinto | County Republican Party | | | 3 | Filer ID (Ethics Commission 00080082 | on Filers) |
| 4 | Date 02/22/2025 | 5 Full name of contributor Clark, Patrick6 Contributor address; City; Stat | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$800.00 |
| 8 | Principal occu | Coldspring, TX 77331 pation / Job title (See Instructions) | 9 | Employer (See Instructions | i) | | |
| | Manager Date 02/22/2025 | Full name of contributor Coats, Lawrence Contributor address; City; Stat | out-of-state PAC (ID#: | Eastex Title | | Amount of Contribution (\$) | \$225.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions Retired | <u>(</u> | | |
| | Date 02/22/2025 | Full name of contributor Coats, Mike (Mr.) Contributor address; City; Stat | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$225.00 |
| | Principal occu Unknown | Coldspring, TX 77331 pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 02/22/2025 | Full name of contributor Dillon, Todd Contributor address; City; Stat | | Unknown) | | Amount of Contribution (\$) | \$450.00 |
| | Principal occu District Attor | pation / Job title (See Instructions) | | Employer (See Instructions San Jacinto County | <u> </u> | | |
| | Date 02/22/2025 | Full name of contributor Egli, Connie Contributor address; City; Stat Cleveland, TX 77328 | | | | Amount of Contribution (\$) | \$1,050.00 |
| | Principal occu Housewife | pation / Job title (See Instructions) | | Employer (See Instructions | () | | |
| | | | | | | | |

| | MONET | ARY POLITICAL (| CONTRIBUTIO | Ν | S | | SCHEDUI | E A1 |
|---|----------------------------|---|------------------------|----|---|-----------------|--|------------|
| | The Instruc | ction Guide explains how | to complete this fo | rr | n. | 1 | Total pages Schedule A1: Sch: 4/6 Rpt: 7/24 | |
| 2 | FILER NAME San Jacinto | County Republican Party | | | | 3 | Filer ID (Ethics Commission 00080082 | on Filers) |
| 4 | Date 02/22/2025 | 6 Contributor address; City; S | out-of-state PAC (ID#: | | | 7 | Amount of Contribution (\$) | \$1,100.00 |
| 8 | Principal occur | Coldspring, TX 77331 pation / Job title (See Instructions | 5) | 9 | Employer (See Instructions | ;) | | |
| • | County Judge | | | - | San Jacinto County | , | | |
| | Date 02/22/2025 | Full name of contributor Houston, Sam Contributor address; City; S | | |) | | Amount of Contribution (\$) | \$2,100.00 |
| | | Cleveland, TX 77328 | <u>,</u> | | | | | |
| | Principal occup Sheriff | pation / Job title (See Instructions | s) | | Employer (See Instructions San Jacinto County | 5) | | |
| | Date 01/15/2025 | Full name of contributor Jackson, Jewel Contributor address; City; S | out-of-state PAC (ID#: | | | | Amount of Contribution (\$) | \$175.00 |
| | | Clevelan, TX 77328 | , | | | Ĺ | | |
| | Retired | pation / Job title (See Instructions | 5) | | Employer (See Instructions Retired | 5) | | |
| | Date 02/22/2025 | Full name of contributor Jackson, Jewel Contributor address; City; S Clevelan, TX 77328 | out-of-state PAC (ID#: | | | | Amount of Contribution (\$) | \$125.00 |
| | Principal occup Retired | pation / Job title (See Instructions | 5) | | Employer (See Instructions Retired | 5) | | |
| | Date 02/12/2025 | Full name of contributor Jolly, Stanley Contributor address; City; S Coldspring, TX 77331 | out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | \$500.00 |
| | Principal occup Retired | pation / Job title (See Instructions | (3) | | Employer (See Instructions | . (5) | | |
| | | | l | | | | | |

| | WONLI | ARY POLITICAL C | CONTRIBUTION | v3 | SCHEDUL | E A1 |
|---|-------------------------------|---|--|---|--|-------------|
| | The Instru | ction Guide explains how | to complete this for | m. | 1 Total pages Schedule A1: Sch: 5/6 Rpt: 8/24 | |
| 2 | FILER NAME San Jacinto | County Republican Party | | | 3 Filer ID (Ethics Commissio 00080082 | n Filers) |
| 4 | Date 01/15/2025 | 5 Full name of contributor Kiss-Schultz, Tricia6 Contributor address; City; St | out-of-state PAC (ID#:ate; Zip Code | _ | 7 Amount of Contribution (\$) | \$1,000.00 |
| | | Tomball, TX 77375 | | | | |
| 8 | Principal occu Property Mg | pation / Job title (See Instructions r. | 9 | Employer (See Instructions Texan Mgmt. Group LP | 5) | |
| | Date 02/03/2025 | Full name of contributor Luttrell, Morgan Contributor address; City; St Magnolia, TX 77353 | out-of-state PAC (ID#: ate; Zip Code | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions | s) | Employer (See Instructions | <u> </u> | |
| | Congressma | | , | U.S. House of Represer | | |
| | Date 02/22/2025 | Full name of contributor Mcgee, Alex (Mr.) Contributor address; City; St | out-of-state PAC (ID#:ate; Zip Code | | Amount of Contribution (\$) | \$1,300.00 |
| | Principal occu | Cleveland, TX 77327 pation / Job title (See Instructions | <u>, </u> | Employer (See Instructions |) | |
| | Service Tech | | | Martin Chevrolet | , | |
| | Date 02/22/2025 | Full name of contributor Schwertner, Charles Contributor address; City; St Georgetown, TX 78628 | out-of-state PAC (ID#:ate; Zip Code | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu Physician | pation / Job title (See Instructions |) | Employer (See Instructions Georgetown Ortho Grou | | |
| | Date 01/14/2025 | Full name of contributor Stanfield, Brandon Contributor address; City; St Coldpspring, TX 77331 | out-of-state PAC (ID#: | | Amount of Contribution (\$) | \$2,500.00 |
| | | pation / Job title (See Instructions | s) | Employer (See Instructions |) | |
| | Propane Ret | ali Sales | | Lamb Propane | | |

| | MONET | ARY POLITICAL (| CONTRIBUTIO | N | S | | SCHEDUL | E A1 |
|---|----------------------------------|---|------------------------|----|---|--------|--|------------|
| | The Instruc | ction Guide explains how | ı to complete this fo | rn | n. | 1 | Total pages Schedule A1: Sch: 6/6 Rpt: 9/24 | |
| 2 | FILER NAME San Jacinto | County Republican Party | | | | 3 | Filer ID (Ethics Commission 00080082 | on Filers) |
| 4 | Date 02/22/2025 | 5 Full name of contributor Trapp, Robert6 Contributor address; City; S | out-of-state PAC (ID#: | |) | 7 | Amount of Contribution (\$) | \$150.00 |
| 8 | Principal occu | Coldspring, TX 77331 pation / Job title (See Instructions | .) | | Employer (See Instructions | ·, | | |
| _ | Judge | pation / 300 title (See Instructions | ·) | | State of Texas | •) | | |
| | Date 02/22/2025 | Full name of contributor Trapp, Robert Contributor address; City; S | | |) | | Amount of Contribution (\$) | \$1,500.00 |
| | Principal occu | Coldspring, TX 77331 pation / Job title (See Instructions | 9 | | Employer (See Instructions | ;) | | |
| | Judge | pation / oob title (See Institutions | | | State of Texas | ,, | | |
| | Date 02/10/2025 | Full name of contributor Vaughan, Susan Contributor address; City; S | out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | \$300.00 |
| | | Coldspring, TX 77331 | | | | | | |
| | Principal occu Real Estate | pation / Job title (See Instructions Broker | s) | | Employer (See Instructions Vaughan Real Estate G | | р | |
| | Date 02/22/2025 | Full name of contributor Webb, Kim Contributor address; City; S Oakhurst, TX 77359 | | |) | | Amount of Contribution (\$) | \$155.00 |
| | Principal occu Justice of the | pation / Job title (See Instructions e peace | 5) | | Employer (See Instructions SAN JAC County | 5) | | |
| | Date 03/03/2025 | Full name of contributor Wright, Dwayne Contributor address; City; S Cleveland, TX 77328 | | |) | | Amount of Contribution (\$) | \$125.00 |
| | Principal occu Consultant | pation / Job title (See Instructions | (3) | | Employer (See Instructions Self | 5) | | |
| | | | 1 | | | | | |

SCHEDULE I

| | The Instruction Guide explains how to | complete tills form. |
|---|---|--|
| Total pages Schedule I: Sch: 1/15 Rpt: | 2 FILER NAME San Jacinto County Republican Party | 3 Filer ID (Ethics Commission Filers 00080082 |
| Date 01/16/2025 | 5 Payee name Eastex Telephone | |
| Amount (\$) 118.71 | 7 Payee Address; City; State; Zip P.O Box 150 Henderson, TX 75653 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description (See instructions regarding type of information required.) TELEPHONE |
| Date | Payee name | |
| 02/16/2025 | Eastex Telephone | |
| Amount (\$) 118.71 | Payee Address; City; State; Zip P.O Box 150 | |
| PURPOSE OF EXPENDITURE | Henderson, TX 75653 (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description (See instructions regarding type of information required. TELEPHONE |
| Date 03/16/2025 | Payee name Eastex Telephone | |
| Amount (\$) 118.71 | Payee Address; City; State; Zip P.O Box 150 Henderson, TX 75653 | |
| PURPOSE OF EXPENDITURE | | (b) Description (See instructions regarding type of information required. TELEPHONE |
| Date 04/16/2025 | Payee name Eastex Telephone | |
| Amount (\$) 118.74 | Payee Address; City; State; Zip P.O Box 150 | |
| PURPOSE OF EXPENDITURE | Henderson, TX 75653 (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description (See instructions regarding type of information required. TELEPHONE |

SCHEDULE I

| | The Instruction Guide explains how to complete this form. |
|---|---|
| Total pages Schedule I: Sch: 2/15 Rpt: | 2 FILER NAME San Jacinto County Republican Party 3 Filer ID (Ethics Commission Filer) 00080082 |
| Date 06/16/2025 | 5 Payee name Eastex Telephone |
| Amount (\$) 118.74 | 7 Payee Address; City; State; Zip P.O Box 150 Henderson, TX 75654 |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required TELEPHONE |
| Date | Payee name |
| 01/10/2025 | Adobe Inc |
| Amount (\$) 21.46 | Payee Address; City; State; Zip 345 Park Avenue |
| PURPOSE OF EXPENDITURE | San Jose, CA 95110 (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required MRC Service |
| Date 02/10/2025 | Payee name Adobe Inc |
| Amount (\$) 21.64 | Payee Address; City; State; Zip 345 Park Avenue |
| PURPOSE OF EXPENDITURE | San Jose, CA 95110 (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required MRC Services |
| Date 03/10/2025 | Payee name Adobe Inc |
| Amount (\$) 21.64 | Payee Address; City; State; Zip 345 Park Avenue San Jose, CA 95110 |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Advertising Expense (b) Description (See instructions regarding type of information required MRC marketing |

| | The Instruction Guide explains how to | complete this form. |
|---|--|---|
| Total pages Schedule I: Sch: 3/15 Rpt: | FILER NAME San Jacinto County Republican Party | 3 Filer ID (Ethics Commission Filers 00080082 |
| Date 04/10/2025 | 5 Payee name Adobe Inc | |
| Amount (\$) 21.64 | 7 Payee Address; City; State; Zip 345 Park Avenue San Jose, CA 95110 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Advertising Expense | (b) Description (See instructions regarding type of information required. MRC |
| Date | Payee name | |
| 05/10/2025 | Adobe Inc | |
| Amount (\$) 21.64 | Payee Address; City; State; Zip 345 Park Avenue | |
| | San Jose, CA 95110 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Advertising Expense | (b) Description (See instructions regarding type of information required. Marketing MRC |
| Date 02/02/2025 | Payee name Apple | |
| Amount (\$) 11.90 | Payee Address; City; State; Zip 1 Apple Parkway | |
| | Cupertino, CA 95014 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required. Computer App |
| Date | Payee name | |
| 02/02/2025 | Apple | |
| Amount (\$) 2.15 | Payee Address; City; State; Zip 1 Apple Parkway | |
| | Cupertino, CA 95014 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description (See instructions regarding type of information required. App Update |

| Total pages Schedule I: Sch: 4/15 Rpt: | FILER NAME San Jacinto County Republican Party | 3 Filer ID (Ethics Commission Filers 00080082 |
|---|--|---|
| Date 03/02/2025 | 5 Payee name Apple | |
| Amount (\$) 11.90 | 7 Payee Address; City; State; Zip 1 Apple Parkway Cupertino, CA 95014 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Fees | (See instructions regarding type of information required. App |
| Date | Payee name | |
| 03/02/2025 | Apple | |
| Amount (\$) 2.15 | Payee Address; City; State; Zip 1 Apple Parkway | |
| PURPOSE OF EXPENDITURE | Cupertino, CA 95014 (a) Category (See instructions for examples of acceptable categories) (Office Overhead/Rental Expense | (b) Description (See instructions regarding type of information required. MRC |
| Date | Payee name | |
| 06/06/2025 | Arizpe, Charissa (Mrs.) | |
| Amount (\$) 571.11 | Payee Address; City; State; Zip P.O. Box 980 Coldspring, TX 77331 | |
| PURPOSE OF EXPENDITURE | | (b) Description (See instructions regarding type of information required. Food for meeting |
| Date 02/12/2025 | Payee name Arizpe, Charissa (Mrs.) | |
| Amount (\$) 120.43 | Payee Address; City; State; Zip P.O. Box 980 | |
| | Coldspring, TX 77331 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) (Event Expense | (b) Description (See instructions regarding type of information required. Batteries |

| | The Instruction Guide explains how to | complete this form. |
|---|---|---|
| Total pages Schedule I: Sch: 5/15 Rpt: | 2 FILER NAME San Jacinto County Republican Party | 3 Filer ID (Ethics Commission Filers 00080082 |
| Date 01/10/2025 | 5 Payee name Best Buy | |
| Amount (\$) 227.31 | 7 Payee Address; City; State; Zip 501 I-45 S Conroe, TX 77304 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description (See instructions regarding type of information required. Monitor |
| Date | Payee name | |
| 06/06/2025 | Booth, Gayle | |
| Amount (\$) 98.00 | Payee Address; City; State; Zip 405 Lakeview Drive Loop | |
| PURPOSE OF EXPENDITURE | Coldspring, TX 77331 (a) Category (See instructions for examples of acceptable categories) Advertising Expense | (b) Description (See instructions regarding type of information required Reimbursement for Ad |
| Date 04/10/2025 | Payee name Calvary Christian Academy | |
| Amount (\$) 1,500.00 | Payee Address; City; State; Zip 65 Petroleum Road | |
| PURPOSE OF EXPENDITURE | Coldspring, TX 77331 (a) Category (See instructions for examples of acceptable categories) Event Expense | (b) Description (See instructions regarding type of information required Donation |
| Date 02/10/2025 | Payee name Coldspring Baptist Church | |
| Amount (\$) 150.00 | Payee Address; City; State; Zip 100 E. Pine Ave | |
| PURPOSE OF EXPENDITURE | Coldspring, TX 77331 (a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense | (b) Description (See instructions regarding type of information required Donation |

| | The Instruction Guide explains how to | complete this form. |
|---|---|---|
| Total pages Schedule I: Sch: 6/15 Rpt: | FILER NAME San Jacinto County Republican Party | 3 Filer ID (Ethics Commission Filers 00080082 |
| Date 05/10/2025 | 5 Payee name Coldspring Vet | <u>,</u> |
| Amount (\$) 250.00 | 7 Payee Address; City; State; Zip 13495 SH150 Coldspring, TX 77331 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense | (b) Description (See instructions regarding type of information required.) Memorial for Mary Wilkerson |
| Date | Payee name | |
| 01/04/2025 | Constant Contact | |
| Amount (\$) 205.26 | Payee Address; City; State; Zip 1601 Trapelo Road Walham, MA 02451 | |
| PURPOSE OF EXPENDITURE | · · | (b) Description (See instructions regarding type of information required. MARKETING COMMUNICATION |
| Date 02/04/2025 | Payee name Constant Contact | |
| Amount (\$) 193.61 | Payee Address; City; State; Zip 1601 Trapelo Road Walham, MA 02451 | |
| PURPOSE OF EXPENDITURE | | (b) Description (See instructions regarding type of information required. MARKETING COMMUNICATION |
| Date 03/04/2025 | Payee name Constant Contact | |
| Amount (\$) 193.61 | Payee Address; City; State; Zip 1601 Trapelo Road Walham, MA 02451 | |
| PURPOSE OF EXPENDITURE | | (b) Description (See instructions regarding type of information required. MARKETING COMMUNICATION |

| | The Instruction Guide explains how to | |
|---|---|---|
| Total pages Schedule I: Sch: 7/15 Rpt: | 2 FILER NAME San Jacinto County Republican Party | 3 Filer ID (Ethics Commission Filers) 00080082 |
| Date 04/04/2025 | 5 Payee name Constant Contact | |
| Amount (\$) 193.61 | 7 Payee Address; City; State; Zip 1601 Trapelo Road Walham, MA 02451 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description (See instructions regarding type of information required.) MARKETING COMMUNICATION |
| Date | Payee name | |
| 05/04/2025 | Constant Contact | |
| Amount (\$) 193.61 | Payee Address; City; State; Zip 1601 Trapelo Road Walham, MA 02451 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description (See instructions regarding type of information required. MARKETING COMMUNICATION |
| Date 06/04/2025 | Payee name Constant Contact | |
| Amount (\$) 205.26 | Payee Address; City; State; Zip 1601 Trapelo Road Walham, MA 02451 | |
| PURPOSE OF EXPENDITURE | | (b) Description (See instructions regarding type of information required. MARKETING COMMUNICATION |
| Date 06/06/2025 | Payee name Galando, Dee | |
| Amount (\$) 43.45 | Payee Address; City; State; Zip 330 Twinstone Circle | |
| PURPOSE OF EXPENDITURE | Coldspring, TX 77331 (a) Category (See instructions for examples of acceptable categories) Event Expense | (b) Description (See instructions regarding type of information required. Food for meeting |

| Total pages Schedule I: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
|------------------------------|--|---|
| Sch: 8/15 Rpt: | San Jacinto County Republican Party | 00080082 |
| Date 02/21/2025 | 5 Payee name Garrett , George (Mr.) | |
| Amount (\$) 128.00 | 7 Payee Address; City; State; Zip 201 Robin Creek Rd Coldspring, TX 77331 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Event Expense | (b) Description (See instructions regarding type of information required.) Reimbursement for event insurance |
| Date | Payee name | |
| 02/10/2025 | O'Reilly's | |
| Amount (\$) 45.44 | Payee Address; City; State; Zip 909 North Washington | |
| | Cleveland, TX 77327 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description (See instructions regarding type of information required.) Tools for Office |
| Date 03/10/2025 | Payee name O'Reilly's | |
| Amount (\$) 45.44 | Payee Address; City; State; Zip 909 North Washington Cleveland, TX 77327 | |
| PURPOSE OF EXPENDITURE | | (b) Description (See instructions regarding type of information required.) Supplies |
| Date 01/15/2025 | Payee name Office Max - Humble TX | |
| Amount (\$) 45.42 | Payee Address; City; State; Zip 20412 US Hwy 59 | |
| PURPOSE OF EXPENDITURE | Humble, TX 77338 (a) Category (See instructions for examples of acceptable categories) Printing Expense | (b) Description (See instructions regarding type of information required. Office supplies and marketing materials |

| | The Instruction Guide explains how to | complete this | S IOIIII. |
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| Total pages Schedule I: Sch: 9/15 Rpt: | FILER NAME San Jacinto County Republican Party | | 3 Filer ID (Ethics Commission Filers 00080082 |
| Date 06/10/2025 | 5 Payee name Pedro Magano | | |
| Amount (\$) 1,000.00 | 7 Payee Address; City; State; Zip 201 SH 150 Coldspring, TX 77331 | | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense | (b) Description Scholarship | (See instructions regarding type of information required.) |
| Date | Payee name | | |
| 02/25/2025 | Ross, Vince | | |
| Amount (\$) 575.00 | Payee Address; City; State; Zip 20 King Lane Coldspring, TX 77331 | | |
| PURPOSE OF EXPENDITURE | <u> </u> | (b) Description Auctioneer | (See instructions regarding type of information required. |
| Date 01/26/2025 | Payee name SHECO | | |
| Amount (\$) 148.25 | Payee Address; City; State; Zip 1157 E. Church Street Livingston, TX 77351 | | |
| PURPOSE OF EXPENDITURE | • | (b) Description Electricity | (See instructions regarding type of information required. |
| Date 02/26/2025 | Payee name SHECO | | |
| Amount (\$) 258.71 | Payee Address; City; State; Zip 1157 E. Church Street | | |
| PURPOSE OF EXPENDITURE | Livingston, TX 77351 (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description Electricity | (See instructions regarding type of information required. |

| | The Instruction Guide explains how to | complete til | |
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| Total pages Schedule I: Sch: 10/15 Rpt: | FILER NAME San Jacinto County Republican Party | | 3 Filer ID (Ethics Commission Filers 00080082 |
| Date 05/26/2025 | 5 Payee name SHECO | | |
| Amount (\$) 113.08 | 7 Payee Address; City; State; Zip1157 E. Church StreetLivingston, TX 77351 | | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description Electricity | (See instructions regarding type of information required. |
| Date | Payee name | | |
| 04/26/2025 | SHECO | | |
| Amount (\$) 203.46 | Payee Address; City; State; Zip 1157 E. Church Street | | |
| PURPOSE OF EXPENDITURE | Livingston, TX 77351 (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description Electricity | (See instructions regarding type of information required. |
| Date 03/26/2025 | Payee name SHECO | | |
| Amount (\$) 258.71 | Payee Address; City; State; Zip 1157 E. Church Street Livingston, TX 77351 | | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description Electricity | (See instructions regarding type of information required. |
| Date 06/26/2025 | Payee name SHECO | | |
| Amount (\$) 111.42 | Payee Address; City; State; Zip 1157 East Church St. Livingston, TX 77351 | | |
| PURPOSE OF EXPENDITURE | | (b) Description Electricity | (See instructions regarding type of information required. |

| | la suspanie | Commission Files |
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| Total pages Schedule I: Sch: 11/15 Rpt: | 2 FILER NAME San Jacinto County Republican Party | 3 Filer ID (Ethics Commission Filers) 00080082 |
| Date 02/13/2025 | 5 Payee name San Jacinto County Shelter | |
| Amount (\$) 900.00 | 7 Payee Address; City; State; Zip 1 State Hwy 150 Coldpring, TX 77331 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Event Expense | (b) Description (See instructions regarding type of information required.) Shelter rent |
| Date 01/10/2025 | Payee name San Jacinto County Sheriff | |
| Amount (\$) 250.00 | Payee Address; City; State; Zip 75 W. Cedar Coldspring, TX 77331 | |
| PURPOSE OF EXPENDITURE | | (b) Description (See instructions regarding type of information required. Donation for Police Week |
| Date 01/01/2025 | Payee name SeemRam Properties | |
| Amount (\$) 800.00 | Payee Address; City; State; Zip 2403 East Houston St Cleveland, TX 77327 | |
| PURPOSE OF EXPENDITURE | | (b) Description (See instructions regarding type of information required. OFFICE RENT |
| Date 02/01/2025 | Payee name SeemRam Properties | |
| Amount (\$) 800.00 | Payee Address; City; State; Zip 2403 East Houston St Cleveland, TX 77327 | |
| PURPOSE OF EXPENDITURE | | (b) Description (See instructions regarding type of information required. OFFICE RENT |

| | The Instruction Guide explains how to complete this form. | |
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| Total pages Schedule I: Sch: 12/15 Rpt: | 2 FILER NAME San Jacinto County Republican Party 3 Filer ID (Ethics Comm 00080082 | ission Filers |
| Date 03/01/2025 | 5 Payee name SeemRam Properties | |
| Amount (\$) 800.00 | 7 Payee Address; City; State; Zip 2403 East Houston St Cleveland, TX 77327 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information of the control of th | ation required.) |
| Date | Payee name | |
| 04/01/2025 | SeemRam Properties | |
| Amount (\$) 800.00 | Payee Address; City; State; Zip 2403 East Houston St | |
| PURPOSE OF EXPENDITURE | Cleveland, TX 77327 (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense OFFICE RENT (b) Description (See instructions regarding type of information of the company o | ation required. |
| Date 05/01/2025 | Payee name SeemRam Properties | |
| Amount (\$) 800.00 | Payee Address; City; State; Zip 2403 East Houston St Cleveland, TX 77327 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense OFFICE RENT (b) Description (See instructions regarding type of information of the company of the c | ation required. |
| Date 06/01/2025 | Payee name SeemRam Properties | |
| Amount (\$) 800.00 | Payee Address; City; State; Zip 2403 East Houston St | |
| PURPOSE OF EXPENDITURE | Cleveland, TX 77327 (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense OFFICE RENT (b) Description (See instructions regarding type of information of the content o | ation required. |

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| Total pages Schedule I: Sch: 13/15 Rpt: | FILER NAME San Jacinto County Republican Party | | 3 Filer ID (Ethics Commission Filers 00080082 |
| Date 01/01/2025 | 5 Payee name SeemRam Properties | | |
| Amount (\$) 50.00 | 7 Payee Address; City; State; Zip 2403 E. Houston St CLEVLAND, TX 77327 | | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description WATER | (See instructions regarding type of information required. |
| Date | Payee name | | |
| 02/01/2025 | SeemRam Properties | | |
| Amount (\$) 50.00 | Payee Address; City; State; Zip 2403 E. Houston St | | |
| | CLEVLAND, TX 77327 | | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description WATER | (See instructions regarding type of information required. |
| Date 03/01/2025 | Payee name SeemRam Properties | | |
| Amount (\$) 50.00 | Payee Address; City; State; Zip 2403 East Houston St Cleveland, TX 77327 | | |
| PURPOSE | (a) Category (See instructions for examples of acceptable categories) | (b) Description | (See instructions regarding type of information required. |
| OF EXPENDITURE | Office Overhead/Rental Expense | WATER | |
| Date | Payee name | | |
| 04/01/2025 Amount (\$) | SeemRam Properties Payee Address; City; State; Zip | | |
| 50.00 | 2403 East Houston St | | |
| | Cleveland, TX 77327 | | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description WATER | (See instructions regarding type of information required. |

| | The Instruction Guide explains how to | |
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| Total pages Schedule I: Sch: 14/15 Rpt: | 2 FILER NAME San Jacinto County Republican Party | 3 Filer ID (Ethics Commission Filers) 00080082 |
| Date 05/01/2025 | 5 Payee name SeemRam Properties | |
| Amount (\$) 50.00 | 7 Payee Address; City; State; Zip 2403 E. Houston St Cleveland, TX 77327 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (See instructions regarding type of information required.) WATER |
| Date | Payee name | |
| 06/01/2025 | SeemRam Properties | |
| Amount (\$) 50.00 | Payee Address; City; State; Zip 2403 East Houston St | |
| | Cleveland, TX 77327 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense | (b) Description (See instructions regarding type of information required. WATER |
| Date 04/10/2025 | Payee name Shepherd ROTC | |
| Amount (\$) | Payee Address; City; State; Zip | |
| 1,500.00 | 1401 South Byrd | |
| | Shepherd, TX 77371 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Event Expense | (b) Description (See instructions regarding type of information required. ROTC donation |
| Date | Payee name | |
| 02/20/2025 | Signature Catering | |
| Amount (\$) 504.80 | Payee Address; City; State; Zip 20109 Dawn Space Mist Dr Humble, TX 77346 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Event Expense | (b) Description (See instructions regarding type of information required Catering |

| Total pages Schedule I: Sch: 15/15 Rpt: | 2 FILER NAME San Jacinto County Republican Party | 3 Filer ID (Ethics Commission Filers) 00080082 |
|---|---|--|
| 4 Date 02/20/2025 | 5 Payee name Snider, Marilyn (Mrs.) | • |
| 6 Amount (\$) 53.58 | 7 Payee Address; City; State; Zip 330 Pine Shadows Circle Point Blank, TX 77364 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Advertising Expense | (b) Description (See instructions regarding type of information required.) Reimbursement for printing |
| Date | Payee name | |
| 01/10/2025 | Vistaprint | |
| Amount (\$) | Payee Address; City; State; Zip | |
| 230.79 | 95 Hayden Ave | |
| | Lexington, MA 02421 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Advertising Expense | (b) Description (See instructions regarding type of information required.) Business cards and flyers |
| Date | Payee name | |
| 01/15/2025 | WordPress Corporate | |
| Amount (\$) 124.53 | Payee Address; City; State; Zip I60 29th Street #343 | |
| | SanFrancisco, CA 94110-4929 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Advertising Expense | (b) Description (See instructions regarding type of information required.) Web Development Application |