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 00055976 3 COMMITTEE NAME **OFFICE USE ONLY** Austin County Republican Party (CEC) Date Received **ELECTRONICALLY FILED** 07/11/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 9510 FM 949 Date Hand-delivered or Date Postmarked Cat Spring, TX 78933 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Charles NAME NICKNAME LAST **SUFFIX** Chuck **Beers** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 9510 FM 949 STREET **ADDRESS** (Residence or Business) Cat Spring, TX 78933 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 9510 FM 949 MAILING **ADDRESS** Catspring, TX 78933 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (979) 885-9523 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 11/04/2025 General χ Special **GO TO PAGE 2**

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME	2 COMMITTEE NAME					
Austin County Republic	Austin County Republican Party (CEC)					
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				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed				
		в. Оррозец				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOAN CONTRIBUTIONS check here if this rep	EED 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)	\$	115.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICAL EXPENDITURES	\$	0.00		
	4. TOTAL POLITION	CAL EXPENDITURES	\$	8,415.03		
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT	L CONTRIBUTIONS MAINTAINED AS OF THE LAST ING PERIOD	DAY \$	17,467.20		
OUTSTANDING LOAN TOTALS		L AMOUNT OF ALL OUTSTANDING LOANS AS OF T E REPORTING PERIOD	HE \$	0.00		
16 AFFIDAVIT	•		•			
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.				
		Mr. Char	les Beers			
		Signature of Car	mpaign Treas	surer		
AFFIX NOTARY	STAMP / SEAL ABOV	E				
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**

				3 of 15					
17 COMMITTEE NAME 18 Filer ID (Ethics Commission Filers)									
	Austin County Republican Party (CEC) 00055976								
19 SCHEDULE SUBTOTALS SUBTOTAL A									
NAME OF S	CHEDULE		0051017						
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	115.00					
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00					
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00					
4. X	SCHEDULE E: LOANS		\$	0.00					
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	8,415.03					
6. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00					
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$						
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00					
9.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$						
10.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$						
			1						

	MONETARY POLITICAL CONTRIBUTIONS	SCH	EDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule Sch: 1/1 Rpt: 4/15	A1:
2	FILER NAME Austin County Republican Party (CEC)	3 Filer ID (Ethics Com 00055976	nmission Filers)
4		7 Amount of Contributio	s45.00
_	Bastrop, TX 78602		
8	Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions)	ctions)	
	Date Full name of contributor out-of-state PAC (ID#:	Amount of Contributio	n (\$) \$20.00
	Sealy, TX 77474 Principal occupation / Job title (See Instructions) UNKNOWN Employer (See Instructions)	ctions)	
	02/01/2025 Sebesta, Tracey Contributor address; City; State; Zip Code	Amount of Contributio	n (\$) \$50.00
	Hempstead, TX 77445 Principal occupation / Job title (See Instructions) unknown Employer (See Instructions) self	ctions)	

PLE	DGED CONTRIBU	TIONS				SCHEDULE B
т	he Instruction Guide exp	1	Total pages Sche Sch: 1/1 Rpt: 5			
2 FILER N	AME County Republican Party (CEC	3		hics Commission Filers)		
1	OF UNITEMIZED PLEDG			\$	0.00	
5 Date	6 Full name of pledgor	out-of-state PAC (ID#		<u>)</u> 8	Amount of pledge (\$)	9 In-kind description (If applicable)
	7 Pledgor Address;	City; State; Zip Code	9		-	
10 Principal	occupation / Job title (See Instru	octions)	11 Employer (See Ins	truct		side of Texas. Complete Schedule T.
·		·	1, 1, 1		,	

	LOANS					SCHEDUL	.E E
	The Instruction	on Guide explains ho	1	ages Schedule E: /1 Rpt: 6/15			
	FILER NAME Austin County R	epublican Party (CEC)			3 Filer ID 00055	(Ethics Commission F	-ilers)
4	TOTAL OF UN	IITEMIZED LOANS			1	\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)	
	Is lender a financial institution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12	Principal occupation	on / Job title (See Instruction	ns)	13 Employer (See Instructio	ns)	•	
14	Description of Coll None	ateral		15 Check if personal funds v	vere deposite	d into political account (See Instructions)	
	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guarantee	ed (\$)
	not applicable	18 Guarantor address;	City; State;	Zip Code			
20	Principal occupation	on		21 Employer (See Instructio	ns)	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense Contributions/ Donations Made By -

Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/9 Rpt: 7/15	Austin County Republican Party (CEC) 00055976
4	Date	5 Payee name
	04/09/2025	Arkon Ink
6	Amount (\$) \$1,250.00	7 Payee address; City; State; Zip Code Cibolo, TX
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 website programming
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/13/2025	Austin County Fair Association
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 1076 E Hill St 1076 Hwy 159 E Bellville, TX 77418
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense deposit for booth at 2025 fair
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/08/2025	Bertrand, Lily
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code
		Wallis, TX 77485
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Brazos High School Scholarship
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

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		Fees Food Gift/ nmittee Lega	nt Expense s d/Beverage Expense Awards/Memorials Expe al Services e Instruction Guide	ense	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Transportation E Travel in District Travel Out of Dis	
ļ_	T. 1 0 1 1 54	_		- mondetion outde	CAPIGITIS III	- TO COII	ipiete tili3 formi.	1_	E". 15	(Ethio: 0init = Eilen)
1	Total pages Schedule F1: Sch: 2/9 Rpt: 8/15	2		Republican Part	y (CEC)			3	Filer ID 00055976	(Ethics Commission Filers)
4	Date	5	Payee name							
	02/01/2025		Betsy Harlan							
6	Amount (\$) \$90.00	7	Payee address;	City;	State;	Zip Coo	de			
8	PURPOSE	(a)		ategories listed at the top	of this sched	dule)	(b) Description			
	OF EXPENDITURE		Food/Beverage				Check if trave	in, TX	ide of Texas. Com , officeholder living neeting	•
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeh	older name	Of	ffice soug	ht		Office h	eld
	Date		Payee name							
	01/10/2025		City of Bellville							
	Amount (\$)		Payee address;	City;	State;	Zip Coo	le			
	\$85.92		30 South Holla							
			Bellville, TX 77	418						
	PURPOSE OF EXPENDITURE	(a)		ategories listed at the top ud/Rental Expens		dule)	<u> </u>	in, TX	ide of Texas. Com , officeholder living	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeh	older name	Of	ffice soug	ht		Office he	eld
	Date		Payee name							
	02/10/2025		City of Bellville							
	Amount (\$) \$94.21		Payee address; 30 South Holla	City; nd St	State;	Zip Coo	le			
			Bellville, TX 77	418						
	PURPOSE OF EXPENDITURE	(a)		ategories listed at the top ad/Rental Expens		dule)	ш	in, TX	ide of Texas. Com , officeholder living	•
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeh	older name	Of	ffice soug	ht		Office he	eld
	Forms provided by Toxas Ethics Commission www.athics state ty us.									

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 Card Payment	The Instruction Guide explains how to con	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 3/9 Rpt: 9/15	Austin County Republican Party (CEC)		00055976
4	Date	5 Payee name		<u> </u>
	03/10/2025	City of Bellville		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$86.67	30 South Holland St		
		Bellville, TX 77418		
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 January utilities
				Sandary dimues
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI		Jiic	Office field
_	Date	Payee name		
	04/10/2025	City of Bellville		
		-	40	
	Amount (\$) \$77.91	Payee address; City; State; Zip Coo 30 South Holland St	JE	
	\$11.91	30 South Holland St		
		Delhalle TV 77440		
		Bellville, TX 77418	<i>.</i>	
	PURPOSE OF	, ,	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense
				Feb utilities
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	05/09/2025	City of Bellville		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$80.14	30 South Holland St		
		Bellville, TX 77418		
	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 March Utilities
				IVIAIGH OUIILLIES
_	Complete ONLY if direct	Candidate/Officeholder name Office souc	nht	Office held
	expenditure to benefit C/OI	~	JIIL	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	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: 4/9 Rpt: 10/15	Austin County Republican Party (CEC) 00055976
4	Date	5 Payee name
	06/10/2025	City of Bellville
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$106.06	30 South Holland St
		Bellville, TX 77418
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
		April utilities
_	Complete ONE V. St. alice	Condidate/Officeholder name Office sought
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_	·	
	Date	Payee name
	01/13/2025	Ebay
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.54	
		San Jose, CA
	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 coffee maker
		Collee maker
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	5 .	
	Date	Payee name
	01/13/2025	Ebay
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.19	
L		San Jose, CA
	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 insurance on coffee maker
		ilisulance on conee maker
	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 Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

ursement Solicitation/Fundraising Expense
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		isted above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Co	mmission Filers)
	Sch: 5/9 Rpt: 11/15	Austin County Republican Party (CEC) 3 Filer ID (Ethics CC) 00055976	minission Fileis)
4	Date	5 Payee name	
	01/31/2025	H.E.B.	
6	Amount (\$) \$130.44	7 Payee address; City; State; Zip Code 2508 S Day	
	\$130.44	2306 3 Day	
		Brenham, TX 77833	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedul	e T.
		Check if Austin, TX, officeholder living expense	
		food for SD 18 meeting	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	01/03/2025	Home Depot	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$47.03	281 Wood Ridge Blvd	
		Brenham, TX 77833	
	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 Schedul Check if Austin, TX, officeholder living expense	е Т.
		replacement lav faucet and drain	
		replacement lav laudet and drain	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	S	
	Date	Payee name	
	05/09/2025	Home Depot	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.12	281 Wood Ridge Blvd	
		Brenham, TX 77833	
	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 Schedul	e I.
		Check if Austin, TX, officeholder living expense A/C filters	
		AC IIILEIS	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		

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 Com

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: 6/9 Rpt: 12/15	Austin County Republican Party (CEC) 00055976
4	Date	5 Payee name
	06/17/2025	Hometown Hardware Bellville
6	Amount (\$) \$11.98	7 Payee address; City; State; Zip Code Bellville, TX 77418
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 toilet repair, original 15.57, return 3.59 on 7/11/25
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/19/2025	Nedd, Colby
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code
		Sealy, TX 77474
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sealy High Scholarship
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/09/2025	Paramount Promotions
	Amount (\$) \$97.43	Payee address; City; State; Zip Code 227 Main St
		Sealy, TX 77474
	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 Badges for new Precinct Chairs
	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 -

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	Il 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: 7/9 Rpt: 13/15	Austin County Republican Party (CEC) 00055976
4	Date	5 Payee name
	05/14/2025	Pawelek, Celeste
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code Bellville, TX 77418
8	PURPOSE	
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bellville High Scholarship
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/01/2025	Schovajsas
	Amount (\$) \$810.00	Payee address; City; State; Zip Code P.O. Box 13
		Bleiblerville, TX 78931
	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 SD 18 meeting
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/08/2025	Sealy Chamber of Commerce
	Amount (\$) \$550.00	Payee address; City; State; Zip Code 309 Main St
		Sealy, TX 77474
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ad in Sealy Chamber magazine
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought 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 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: Sch: 8/9 Rpt: 14/15	2 FILER NAME Austin County Republican Party (CEC) 3 Filer ID (Ethics Commission Filers) 00055976
4	Date 04/08/2025	5 Payee name State Farm
6	Amount (\$) \$420.14	7 Payee address; City; State; Zip Code 131 Main St Sealy, TX 77474
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 Insurance
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 06/05/2025	Payee name Stuessol, Greg
	Amount (\$) \$75.00	Payee address; City; State; Zip Code Sealy, TX 77474
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense create video of Meeting of trafficing
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 01/03/2025	Payee name WalMart Brenham
	Amount (\$) \$32.35	Payee address; City; State; Zip Code
		TX
	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 3 small heaters for bathroom and water heater close
	Complete ONLY 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 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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (or best a content of the listed above)

	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: 9/9 Rpt: 15/15	Austin County Republican Party (CEC) 00055976		
4	Date	5 Payee name		
	01/21/2025	WalMart Sealy		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$8.32	310 Overcreek Way		
		Sealy, TX 77474		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		picture frame light repair		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OH			
	Date	Payee name		
	05/14/2025	WalMart Sealy		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$2.58	310 Overcreek Way		
		Sealy, TX 77474		
	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		
		file folder labels		
		ille folder labele		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OH				
-	Date	Payee name		
	05/02/2025	Weber, Samantha		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$1,000.00	2058 Peters San Felip Rd		
	φ1,000.00	2000 Feters San Felip Nu		
		Sealy, TX 77474		
	PURPOSE			
	OF	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		Home School Scholarship		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OH				