

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00085707	2 Total pages filed: 40	
3 COMMITTEE NAME South Texas Alliance of Republicans			OFFICE USE ONLY	
			Date Received ELECTRONICALLY FILED 07/13/2025	
			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address			ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4934 High Meadow Dr Corpus Christi, TX 78413	
5 CAMPAIGN TREASURER NAME			MS / MRS / MR FIRST MI Mr. Terry L. NICKNAME LAST SUFFIX Morris	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)			STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2414 Cleo St Corpus Christi, TX 78405	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address			STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
8 CAMPAIGN TREASURER PHONE			AREA CODE PHONE NUMBER EXTENSION (361) 336-8422	
9 REPORT TYPE			<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff	
10 PERIOD COVERED			Month Day Year Month Day Year 01/01/2025 THROUGH 06/30/2025	
11 ELECTION			ELECTION DATE Month Day Year ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME South Texas Alliance of Republicans	13 Filer ID (Ethics Commission Filers) 00085707
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 30.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9,800.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,180.80
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.

Mr. Terry L. Morris

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 40

17 COMMITTEE NAME South Texas Alliance of Republicans		18 Filer ID (Ethics Commission Filers) 00085707
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 9,200.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 600.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 9,718.88
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/27 Rpt: 4/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 01/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALDAPE, ROSE 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) self
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALDAPE, ROSE Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) self
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALDAPE, ROSE Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) self
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALDAPE, ROSE Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) self
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALDAPE, ROSE Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/27 Rpt: 5/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 05/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALDAPE, ROSE 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) self
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALDAPE, ROSE Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) self
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Nancy Contributor address; City; State; Zip Code Aransas Pass, TX 78365	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Retired
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Nancy Contributor address; City; State; Zip Code Aransas Pass, TX 78365	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Retired
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMLE, VIC Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) SALES MANAGER		Employer (See Instructions) Sherwin Williams

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/27 Rpt: 6/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 02/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMLE, VIC <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) SALES MANAGER		9 Employer (See Instructions) Sherwin Williams
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMLE, VIC <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) SALES MANAGER		Employer (See Instructions) Sherwin Williams
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMLE, VIC <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) SALES MANAGER		Employer (See Instructions) Sherwin Williams
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMLE, VIC <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) SALES MANAGER		Employer (See Instructions) Sherwin Williams
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMLE, VIC <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SALES MANAGER		Employer (See Instructions) Sherwin Williams

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/27 Rpt: 7/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 03/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMLE, VIC <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) SALES MANAGER		9 Employer (See Instructions) Sherwin Williams
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMLE, VIC <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) SALES MANAGER		Employer (See Instructions) Sherwin Williams
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYAN, AUBREY <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78410	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYAN, AUBREY <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78410	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges Young, Kimberly <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78718	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/27 Rpt: 8/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 03/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASTEEN, NANCY <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASTEEN, NANCY <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASTEEN, NANCY <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chesney, Brent (Commissioner) <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Nueces County
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cron, Jenny (Judge) <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78412	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/27 Rpt: 9/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 02/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cudd, John 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78410	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Business owner		9 Employer (See Instructions) self
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cudd, John Contributor address; City; State; Zip Code Corpus Christi, TX 78410	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) self
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cudd, John Contributor address; City; State; Zip Code Corpus Christi, TX 78410	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) self
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cudd, John Contributor address; City; State; Zip Code Corpus Christi, TX 78410	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) self
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALTON, BETTYLOU Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) VOLUNTEER		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/27 Rpt: 10/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 03/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALTON, BETTYLOU <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) VOLUNTEER		9 Employer (See Instructions) Retired
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALTON, BETTYLOU <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) VOLUNTEER		Employer (See Instructions) Retired
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALTON, BETTYLOU <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) VOLUNTEER		Employer (See Instructions) Retired
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALTON, BETTYLOU <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) VOLUNTEER		Employer (See Instructions) Retired
Date 01/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALTON, BETTYLOU <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) VOLUNTEER		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/27 Rpt: 11/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 05/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURHAM, CHARLES (Mr.) <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78404	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eyles, Donna <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Publications EIP		Employer (See Instructions)
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fryer, Samuel <hr/> Contributor address; City; State; Zip Code Corpus CXhristi, TX 78413	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 01/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GURGEVICH, MARK (Mr.) <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78466	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GURGEVICH, MARK (Mr.) <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78466	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/27 Rpt: 12/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 03/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GURGEVICH, MARK (Mr.) <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78466	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GURGEVICH, MARK (Mr.) <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78466	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GURGEVICH, MARK (Mr.) <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78466	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GURGEVICH, MARK (Mr.) <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78466	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gagnon, Mary <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Westwind Enterprises

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/27 Rpt: 13/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 05/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goedhart, Gayle 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78415	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goedhart, Gayle Contributor address; City; State; Zip Code Corpus Christi, TX 78415	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grabam, Ron Contributor address; City; State; Zip Code Corpus Christi, TX 78402	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grabam, Ron Contributor address; City; State; Zip Code Corpus Christi, TX 78402	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimsbo, Dan Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired Military		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/27 Rpt: 14/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 05/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIX, JERIANNE 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOVDA, DEBORAH Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78409	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOVDA, DEBORAH Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78409	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOVDA, DEBORAH Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78409	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOVDA, DEBORAH Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78409	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/27 Rpt: 15/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 05/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOVDA, DEBORAH 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78409	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOVDA, DEBORAH Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78409	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOVDA, DEBORAH Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78409	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOVDA, DEBORAH Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78409	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER, TODD Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78401	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hunter Law Firm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/27 Rpt: 16/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 02/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER, TODD <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78401	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Hunter Law Firm
Date 03/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER, TODD <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78401	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hunter Law Firm
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER, TODD <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78401	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hunter Law Firm
Date 04/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER, TODD <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78401	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hunter Law Firm
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER, TODD <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78401	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hunter Law Firm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/27 Rpt: 17/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER, TODD 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78401	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Hunter Law Firm
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER, TODD Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78401	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hunter Law Firm
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoefel, Annie Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooper, John C (Officer) Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Sheriff		Employer (See Instructions) Nueces County
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooper, John C (Officer) Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Sheriff		Employer (See Instructions) Nueces County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/27 Rpt: 18/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 05/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurlburt, Lynne 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78414	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONCKHEERE, LINDA Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONCKHEERE, LINDA Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jernegan, Barbara Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retered		Employer (See Instructions)
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamb, Susan Contributor address; City; State; Zip Code Corpus Christi, TX 78414	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Precinct Chair		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/27 Rpt: 19/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 01/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawing, Mark 6 Contributor address; City; State; Zip Code Robstown, TX 78380	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Supervisor		9 Employer (See Instructions) Circle 8 Crane Services
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAPP, CHRIS Contributor address; City; State; Zip Code PORT O'CONNOR, TX 77982	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions)
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magill, Chad Contributor address; City; State; Zip Code Corpus Christi , TX 78404	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazurek, Frank Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazurek, Frank Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/27 Rpt: 20/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 03/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazurek, Frank <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78418	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCauley, Mike (Judge) <hr/> Contributor address; City; State; Zip Code Corpus Christi , TX 78466	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge 28th Court of Law		Employer (See Instructions) City of Corpus Christi, Tx
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCauley, Mike (Judge) <hr/> Contributor address; City; State; Zip Code Corpus Christi , TX 78466	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge 28th Court of Law		Employer (See Instructions) City of Corpus Christi, Tx
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCauley, Mike (Judge) <hr/> Contributor address; City; State; Zip Code Corpus Christi , TX 78466	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge 28th Court of Law		Employer (See Instructions) City of Corpus Christi, Tx
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCauley, Mike (Judge) <hr/> Contributor address; City; State; Zip Code Corpus Christi , TX 78466	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge 28th Court of Law		Employer (See Instructions) City of Corpus Christi, Tx

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/27 Rpt: 21/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 05/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCauley, Mike (Judge) <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi , TX 78466	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Judge 28th Court of Law		9 Employer (See Instructions) City of Corpus Christi, Tx
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milu, Kristin <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78414	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orcutt, Michelle <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orcutt, Michelle <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Christy <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78410	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Gulf Coast Local		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/27 Rpt: 22/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 05/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinson, Jana 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78411	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Director Pregnancy Center		9 Employer (See Instructions) Same
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMEROS, CRISSY Contributor address; City; State; Zip Code Corpus Christi, TX 78414	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) Rep Todd Hunter
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, Kenneth Contributor address; City; State; Zip Code Rockport, TX 78382	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, Kenneth Contributor address; City; State; Zip Code Rockport, TX 78382	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Resley, Daniel Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/27 Rpt: 23/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 01/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Resley, Daniel 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78418	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) Retired
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Resley, Daniel Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Retired
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Resley, Daniel Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Retired
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Resley, Daniel Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Retired
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Resley, Daniel Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/27 Rpt: 24/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 06/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Resley, Daniel <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78418	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) Retired
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rorex, Bronwen <hr/> Contributor address; City; State; Zip Code Rockport, TX 78382	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEXTON, TERI <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEXTON, TERI <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEXTON, TERI <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/27 Rpt: 25/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 03/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEXTON, TERI 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEXTON, TERI Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEXTON, TERI Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEXTON, TERI Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stich, Ronald Contributor address; City; State; Zip Code Corpus Christi, TX 78414	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/27 Rpt: 26/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 05/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stich, Ronald <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78414	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes, Dee <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78410	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Precinct chair		Employer (See Instructions)
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes, Dee <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78410	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Precinct chair		Employer (See Instructions)
Date 04/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes, Sandy <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78410	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes, Sandy <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78410	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/27 Rpt: 27/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 01/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strauss, Rossy <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78418	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strauss, Rossy <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strauss, Rossy <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOLSEY, JO (Judge) <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78414	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions)
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Jon <hr/> Contributor address; City; State; Zip Code Robstown, TX 78380	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Assistant DA		Employer (See Instructions) San Patricio County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/27 Rpt: 28/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 04/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Jon 6 Contributor address; City; State; Zip Code Robstown, TX 78380	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Judge 13th Court of Appeals		9 Employer (See Instructions) State of Texas
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittington, Jeanne Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittington, Jeanne Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittington, Jeanne Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittington, Jeanne Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/27 Rpt: 29/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 04/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittington, Jeanne <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78413	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Designer		9 Employer (See Instructions) Self
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittington, Jeanne <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittington, Jeanne <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittington, Jeanne <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittington, Jeanne <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/27 Rpt: 30/40
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707
4 Date 06/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittington, Jeanne 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78413	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittington, Jeanne Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 31/40	
2 FILER NAME South Texas Alliance of Republicans		3 Filer ID (Ethics Commission Filers) 00085707	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 01/08/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER, TODD 7 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78401	8 Amount of contribution (\$) \$500.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	9 In-kind contribution description
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney		11 Employer (FOR NON-JUDICIAL) (See instructions) Hunter Law Firm	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
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)			
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER, TODD (The Honorable) Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78401	Amount of contribution (\$) \$100.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description Gift
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney		Employer (FOR NON-JUDICIAL) (See instructions) Hunter Law Firm	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/9 Rpt:	2 FILER NAME South Texas Alliance of Republicans	3 Filer ID (Ethics Commission Filers) 00085707
4 Date 01/17/2025	5 Payee name AT&T	
6 Amount (\$) 62.66 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 5425 S Padre Island Dr, Suite 180 CORPUS CHRISTI, TX 78411	
8 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.) Phone bill
Date 02/17/2025	Payee name AT&T	
Amount (\$) 63.60 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5425 S Padre Island Dr, Suite 180 CORPUS CHRISTI, TX 78411	
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.) Phone bill
Date 03/18/2025	Payee name AT&T	
Amount (\$) 63.60 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5425 S Padre Island Dr, Suite 180 CORPUS CHRISTI, TX 78411	
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.) Phone Bill
Date 04/14/2025	Payee name AT&T	
Amount (\$) 63.60 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5425 S Padre Island Dr, Suite 180 CORPUS CHRISTI, TX 78411	
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.) Phone bill

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/9 Rpt:	2 FILER NAME South Texas Alliance of Republicans	3 Filer ID (Ethics Commission Filers) 00085707
4 Date 05/15/2025	5 Payee name AT&T	
6 Amount (\$) 63.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 5425 S Padre Island Dr, Suite 180 CORPUS CHRISTI, TX 78411	
8 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.) Phone Bill
Date 06/16/2025	Payee name AT&T	
Amount (\$) 63.60 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5425 S Padre Island Dr, Suite 180 CORPUS CHRISTI, TX 78411	
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.) Phone Bill
Date 01/20/2025	Payee name AT&T	
Amount (\$) 66.80 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5425 S Padre Island Dr, Suite 180 CORPUS CHRISTI, TX 78411	
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.) WiFi
Date 02/20/2025	Payee name AT&T	
Amount (\$) 66.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5425 S Padre Island Dr, Suite 180 CORPUS CHRISTI, TX 78411	
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.) WiFi

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/9 Rpt:	2 FILER NAME South Texas Alliance of Republicans	3 Filer ID (Ethics Commission Filers) 00085707
4 Date 03/20/2025	5 Payee name AT&T	
6 Amount (\$) 66.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 5425 S Padre Island Dr, Suite 180 CORPUS CHRISTI, TX 78411	
8 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.) WiFi
Date 04/20/2025	Payee name AT&T	
Amount (\$) 66.60 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5425 S Padre Island Dr, Suite 180 CORPUS CHRISTI, TX 78411	
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.) WiFi
Date 05/20/2025	Payee name AT&T	
Amount (\$) 66.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5425 S Padre Island Dr, Suite 180 CORPUS CHRISTI, TX 78411	
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.) WiFi
Date 06/20/2025	Payee name AT&T	
Amount (\$) 66.60 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5425 S Padre Island Dr, Suite 180 CORPUS CHRISTI, TX 78411	
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.) WiFi

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 4/9 Rpt:	2 FILER NAME South Texas Alliance of Republicans	3 Filer ID (Ethics Commission Filers) 00085707
4 Date 01/05/2025	5 Payee name CubesmartStorage Company	
6 Amount (\$) 132.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 5502 Holly Road unit 4037 Corpus Christi, TX 78413	
8 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.) Storage Unit
Date 02/05/2025	Payee name CubesmartStorage Company	
Amount (\$) 132.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5502 Holly Road unit 4037 Corpus Christi, TX 78413	
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.) Storage Unit
Date 03/05/2025	Payee name CubesmartStorage Company	
Amount (\$) 132.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5502 Holly Road unit 4037 Corpus Christi, TX 78413	
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.) Storage Unit
Date 03/05/2025	Payee name CubesmartStorage Company	
Amount (\$) 132.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5502 Holly Road unit 4037 Corpus Christi, TX 78413	
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.) Storage Unit

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 5/9 Rpt:	2 FILER NAME South Texas Alliance of Republicans	3 Filer ID (Ethics Commission Filers) 00085707
4 Date 04/05/2025	5 Payee name CubesmartStorage Company	
6 Amount (\$) 132.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 5502 Holly Road unit 4037 Corpus Christi, TX 78413	
8 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.) Storage unit
Date 05/05/2025	Payee name CubesmartStorage Company	
Amount (\$) 132.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5502 Holly Road unit 4037 Corpus Christi, TX 78413	
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.) Storage Unit
Date 06/03/2025	Payee name Family Dollar	
Amount (\$) 62.75 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 6601 Everhardt Rd Corpus Christi, TX 78413	
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.) Monthly Birthday and sympathy Cards
Date 06/27/2025	Payee name HEB	
Amount (\$) 82.87 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5425 S Padre Island Dr, Ste. 136B CORPUS CHRISTI, TX 78411	
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.) Office supplies

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 6/9 Rpt:	2 FILER NAME South Texas Alliance of Republicans	3 Filer ID (Ethics Commission Filers) 00085707
4 Date 05/07/2025	5 Payee name HOLIDAY INN MARINA	
6 Amount (\$) 339.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 707 N. Shoreline CORPUS CHRISTI, TX 78401	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Hotel for Allen West Star Event
Date 01/06/2025	Payee name Joes Crab Shack	
Amount (\$) 990.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 444 Shoreline Dr Corpus Christi, TX 78405	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Monthly Luncheon
Date 02/03/2025	Payee name Joes Crab Shack	
Amount (\$) 880.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 444 Shoreline Dr Corpus Christi, TX 78405	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Monthly Luncheon
Date 03/03/2025	Payee name Joes Crab Shack	
Amount (\$) 1,020.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 444 Shoreline Dr Corpus Christi, TX 78405	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Monthly Luncheon

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 7/9 Rpt:	2 FILER NAME South Texas Alliance of Republicans	3 Filer ID (Ethics Commission Filers) 00085707
4 Date 04/07/2025	5 Payee name Joes Crab Shack	
6 Amount (\$) 980.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 444 Shoreline Dr Corpus Christi, TX 78405	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Monthly Luncheon
Date 05/05/2025	Payee name Joes Crab Shack	
Amount (\$) 2,058.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 444 Shoreline Dr Corpus Christi, TX 78405	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) May 5th Luncheon with Lt. Col. Allen West
Date 06/02/2025	Payee name Joes Crab Shack	
Amount (\$) 1,410.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 444 Shoreline Dr Corpus Christi, TX 78405	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) June Luncheon
Date 01/28/2025	Payee name Prosperity Bank	
Amount (\$) 10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 6670 S Staples Corpus Christi, TX 78413	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Bank Fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 8/9 Rpt:	2 FILER NAME South Texas Alliance of Republicans	3 Filer ID (Ethics Commission Filers) 00085707
4 Date 02/28/2025	5 Payee name Prosperity Bank	
6 Amount (\$) 10.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 6670 S Staples Corpus Christi, TX 78413	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Bank Fee
Date 03/28/2025	Payee name Prosperity Bank	
Amount (\$) 10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 6670 S Staples Corpus Christi, TX 78413	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Bank Fee
Date 04/28/2025	Payee name Prosperity Bank	
Amount (\$) 10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 6670 S Staples Corpus Christi, TX 78413	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Bank Fee
Date 05/28/2025	Payee name Prosperity Bank	
Amount (\$) 10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 6670 S Staples Corpus Christi, TX 78413	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Bank Fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 9/9 Rpt:	2 FILER NAME South Texas Alliance of Republicans	3 Filer ID (Ethics Commission Filers) 00085707
4 Date 06/28/2025	5 Payee name Prosperity Bank	
6 Amount (\$) 10.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 6670 S Staples Corpus Christi, TX 78413	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Bank Fee
Date 04/14/2025	Payee name Prosperity Bank	
Amount (\$) 119.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 6670 S Staples Corpus Christi, TX 78413	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Checks and Deposit books
Date 04/24/2025	Payee name USPS	
Amount (\$) 86.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 4901 Everhart Rd Corpus Christi, TX 78466	
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.) Stamps
Date 02/15/2025	Payee name Whittington, Jeanne	
Amount (\$) 60.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 4934 High Meadow Dr Corpus Christi, TX 78413	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Transportation Equipment And Related Expense	(b) Description (See instructions regarding type of information required.) Gas for travel expenses