

POLITICAL PARTY REPORT REGARDING FUNDS FROM CORPORATIONS AND LABOR ORGANIZATIONS

FORM **PTY-CORP**
COVER SHEET PG 1

The Form PTY-CORP Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00023974		2 Total pages filed 16		
3 POLITICAL PARTY NAME	San Jacinto County Republican Party (P)			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/14/2025 Date Hand-delivered or Date Postmarked		
4 STATE OR COUNTY PARTY	<input type="checkbox"/> State <input checked="" type="checkbox"/> County: <u>San Jacinto</u>					
5 POLITICAL PARTY TYPE	<input type="checkbox"/> Democrat <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Libertarian <input type="checkbox"/> Other: _____ (Party name)					
6 POLITICAL PARTY MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 370 Coldspring, TX 77331			Receipt # Amount Date Processed Date Imaged		
7 POLITICAL PARTY CHAIR	TITLE	FIRST	MI	NICKNAME	LAST	SUFFIX
		Dwayne			Wright	
8 CHAIR MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 100 S. Magnolia Dr. Cleveland, TX 77328					
9 CHAIR STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 100 S. Magnolia Dr. Cleveland, TX 77328					
10 CHAIR PHONE	AREA CODE	PHONE NUMBER			EXTENSION	
	(832)	966-1300				
11 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before primary election <input type="checkbox"/> 50th day before general election					
12 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day
	01/01/2025				06/30/2025	

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**POLITICAL PARTY REPORT:
TOTALS AND AFFIDAVIT**

**FORM PTY-CORP
COVER SHEET PG 2**

13 POLITICAL PARTY NAME San Jacinto County Republican Party (P)		14 Filer ID (Ethics Commission Filers) 00023974
15 TOTALS	1. TOTAL CONTRIBUTIONS FROM CORPORATE OR LABOR ORGANIZATIONS (OTHER THAN LOANS OR GUARANTEES OF LOANS)	\$ 8,450.00
	2. TOTAL EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS	\$ 2,996.91
	3. TOTAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 11,545.60

A political party must file a report on FORM PTY-CORP for any reporting period during which the party accepts corporate or labor organization contributions, maintains corporate or labor organization contributions, or makes expenditures from corporate or labor organization contributions.

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

The Honorable Dwayne Wright

Signature of Political Party Chair

AFFIX NOTARY STAMP / SEAL

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 - PTYCORP**FORM PTY-CORP**
COVER SHEET PG 3
3 of 16

17 POLITICAL PARTY NAME San Jacinto County Republican Party (P)		18 Filer ID (Ethics Commission Filers) 00023974
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 8,450.00
2.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
3.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS	\$ 2,996.91
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/1 Rpt: 4/16
2 FILER NAME San Jacinto County Republican Party (P)		3 Filer ID (Ethics Commission Filers) 00023974
4 Date 02/28/2025	5 Corporation / Labor Organization name Alabama-Coushatta Tribe <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code Livingston, TX 77351	7 Amount of contribution (\$) \$2,500.00
Date 02/28/2025	Corporation / Labor Organization name Bank of San Jacinto County <hr/> Corporation / Labor Organization address; City; State; Zip Code Coldspring, TX 77331	Amount of contribution (\$) \$3,000.00
Date 02/28/2025	Corporation / Labor Organization name EASTEX TITLE COMPANY, INC. <hr/> Corporation / Labor Organization address; City; State; Zip Code COLDSPRING, TX 77331	Amount of contribution (\$) \$2,950.00

EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/12 Rpt: 5/16	2 FILER NAME San Jacinto County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00023974
4 Date 02/10/2025	5 Payee name Al.Fyxr	
6 Amount (\$) \$3.30	7 Payee address; City; State; Zip Code London 034139 United Kingdom	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Email PProcessing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/10/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$330.00	Office held	
<input checked="" type="checkbox"/> Expenditure from corporate funds	Payee name Al.Fyxr	
	Payee address; City; State; Zip Code 034139 United Kingdom	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Email PProcessing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/24/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$21.64	Office held	
<input checked="" type="checkbox"/> Expenditure from corporate funds	Payee name Adobe System	
	Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Adobe Subscription for Office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name		
Office sought		
Office held		

EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/12 Rpt: 6/16	2 FILER NAME San Jacinto County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00023974
4 Date 02/24/2025	5 Payee name Adobe System	
6 Amount (\$) \$21.64 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Adobe Subscription for Office
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 04/25/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$21.64 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee name Adobe System Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Adobe Subscription for Office
Complete ONLY if direct expenditure to benefit C/OH		
Date 03/24/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$21.64 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee name Adobe System Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Adobe Subscription for Office
Complete ONLY if direct expenditure to benefit C/OH		

EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/12 Rpt: 7/16	2 FILER NAME San Jacinto County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00023974
4 Date 05/27/2025	5 Payee name Adobe System	
6 Amount (\$) \$21.64	7 Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Adobe Subscription for Office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/24/2025	Payee name Adobe System	
Amount (\$) \$21.64	Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Adobe Subscription for Office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/10/2025	Payee name Apple	
Amount (\$) \$129.89	Payee address; City; State; Zip Code CA	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Apple tablet for kiosk
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/12 Rpt: 8/16	2 FILER NAME San Jacinto County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00023974
4 Date 02/10/2025	5 Payee name Apple	
6 Amount (\$) \$11.90 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Apple tablet for kiosk
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 02/10/2025	Candidate/Officeholder name Office sought Office held	
Payee name Apple		
Amount (\$) \$180.77 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code CA	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Apple tablet for kiosk
Complete ONLY if direct expenditure to benefit C/OH		
Date 02/19/2025	Candidate/Officeholder name Office sought Office held	
Payee name Apple		
Amount (\$) \$0.99 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code CA	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Apple tablet for kiosk
Complete ONLY if direct expenditure to benefit C/OH		

EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/12 Rpt: 9/16	2 FILER NAME San Jacinto County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00023974
4 Date 03/07/2025	5 Payee name Apple	
6 Amount (\$) \$11.90 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Apple tablet for kiosk data
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 03/13/2025	Candidate/Officeholder name Office sought Office held	
Payee name Apple		
Amount (\$) \$2.15 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code CA	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Apple tablet for kiosk data
Complete ONLY if direct expenditure to benefit C/OH		
Date 03/19/2025	Candidate/Officeholder name Office sought Office held	
Payee name Apple		
Amount (\$) \$0.99 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code CA	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Apple tablet for kiosk data
Complete ONLY if direct expenditure to benefit C/OH		

EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/12 Rpt: 10/16	2 FILER NAME San Jacinto County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00023974
4 Date 01/21/2025	5 Payee name Best Buy	
6 Amount (\$) \$227.31	7 Payee address; City; State; Zip Code 20408 HWY 59 N Humble, TX 77338	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Monitor for Office PC
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/10/2025	Payee name Best Buy	
Amount (\$) \$286.84	Payee address; City; State; Zip Code 20408 HWY 59 N Humble, TX 77338	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Office Printer Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2025	Payee name Country Tire Service	
Amount (\$) \$50.00	Payee address; City; State; Zip Code Cleveland, TX 77327	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Install Tires on HQ Trailer
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/12 Rpt: 11/16	2 FILER NAME San Jacinto County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00023974
4 Date 06/02/2025	5 Payee name Google LLC	
6 Amount (\$) \$76.75 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. GSuite Email
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2025	Payee name JOTFORM	
Amount (\$) \$498.89 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 PINE STREET 1815 SAN FRANCISCO, CA 94111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Voter Engagement Form Production/ Annual
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/03/2025	Payee name O'reilly Auto Parts	
Amount (\$) \$45.44 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 909 N Washington Ave. Cleveland, TX 77327	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Maintenance for Office Generator
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/12 Rpt: 12/16	2 FILER NAME San Jacinto County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00023974
4 Date 01/21/2025	5 Payee name OFFICE MAX	
6 Amount (\$) \$45.42 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code Humble, TX 77338	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Printing Paper for Reagan Dinner
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/10/2025	Candidate/Officeholder name Office sought Office held	
Payee name Remarkable		
Amount (\$) \$0.31 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Fridtjof Nansens vei 12 Oslo 0369 Norway	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Remarkable PDF processor notes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/10/2025	Candidate/Officeholder name Office sought Office held	
Payee name Remarkable		
Amount (\$) \$31.39 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Fridtjof Nansens vei 12 Oslo 0369 Norway	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Remarkable PDF processor notes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/12 Rpt: 13/16	2 FILER NAME San Jacinto County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00023974
4 Date 06/20/2025	5 Payee name San Jacinto County Republican Party	
6 Amount (\$) \$61.25	7 Payee address; City; State; Zip Code 1 State HWY 150 Coldspring, TX 77331	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Trailer Registration Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/20/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$2.00	Payee name San Jacinto County Republican Party	
<input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1 State HWY 150 Coldspring, TX 77331	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Trailer Registration Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/23/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$27.00	Payee name Tractor Supply	
<input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Cleveland, TX 77327	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. HQ trailer lock/key
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name		
Office sought		
Office held		

EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/12 Rpt: 14/16	2 FILER NAME San Jacinto County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00023974
4 Date 01/02/2025	5 Payee name VISTAPRINT	
6 Amount (\$) \$230.79 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code MA 92951	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Office Printing for HQ
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/27/2025	Payee name Wordpress	
Amount (\$) \$124.53 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 60 29th Street #343 San Francisco, CA 94110	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Website for Party
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/06/2025	Payee name Wordpress	
Amount (\$) \$19.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 60 29th Street #343 San Francisco, CA 94110	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Website for Party
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/12 Rpt: 15/16	2 FILER NAME San Jacinto County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00023974
4 Date 06/20/2025	5 Payee name amazon	
6 Amount (\$) \$143.60	7 Payee address; City; State; Zip Code Seattle, WA 55797	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. HQ trailer tires
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/20/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$47.88	Payee name amazon	Office held
<input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. New Trailer Jack for HQ trailer
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/11/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$108.24	Payee name microsoft	Office held
<input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code WA 32442	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. software 365
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name		
Office sought		
Office held		

EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/12 Rpt: 16/16	2 FILER NAME San Jacinto County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00023974
4 Date 06/11/2025	5 Payee name zoom	
6 Amount (\$) \$168.54 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 55 Almaden Blvd Suite 600 San Jose, CA 95113	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Zoom Video Conferencing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held