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): 00087740

2 Total pages filed: 5

3 COMMITTEE NAME: Marion County Republican Assembly

OFFICE USE ONLY

Date Received: ELECTRONICALLY FILED 09/09/2025

Date Hand-delivered or Date Postmarked:

Receipt #: | Amount:

Date Processed:

Date Imaged:

4 COMMITTEE ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

280 Private Road 5281

Lone Star, TX 75668

5 CAMPAIGN TREASURER NAME

MS / MRS / MR: Mr.

FIRST: Jason H.

MI:

NICKNAME:

LAST: Bonner

SUFFIX:

6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

280 Private Road 5281

Lone Star, TX 75668

7 CAMPAIGN TREASURER MAILING ADDRESS

☐ Change of Address

STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

280 Private Road 5281

Lone Star, TX 75668

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(940) 300-9972

9 REPORT TYPE

- ☐ January 15
- ☐ 30th day before election
- ☐ Dissolution (Attach PAC-DR)
- ☐ 8th day before election
- ☐ 10th day after campaign treasurer termination
- ☒ July 15
- ☐ Runoff

10 PERIOD COVERED

Month Day Year: 01/01/2025 THROUGH Month Day Year: 06/30/2025

11 ELECTION

ELECTION DATE: Month Day Year

ELECTION TYPE

- ☐ Primary
- ☐ Runoff
- ☐ Other
- ☐ General
- ☐ Special

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC
COVER SHEET PG 2

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
Marion County Republican Assembly	00087740

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) ☐ check here if this report qualifies for the higher itemization threshold	$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 0.00
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	$ 0.00
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. Jason H. Bonner

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

17 COMMITTEE NAME	**18** Filer ID (Ethics Commission Filers)
Marion County Republican Assembly	00087740

19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	☐	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	**$**
2.	☐	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	**$**
3.	☐	SCHEDULE B: PLEDGED CONTRIBUTIONS	**$**
4.	☐	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	**$**
5.	☐	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	**$**
6.	☐	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	**$**
7.	☐	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	**$**
8.	☐	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	**$**
9.	☐	SCHEDULE E: LOANS	**$**
10.	☐	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	**$**
11.	☐	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	**$**
12.	☐	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	**$**
13.	☐	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	**$**
14.	☒	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	**$** 300.00
15.	☐	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	**$**

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/2 Rpt: 4/5	Marion County Republican Assembly	00087740

4 Date	5 Payee name
01/14/2025	MIMS VFD Ladies Aux
6 Amount ($) 50.00 ☐ Expenditure from corporate funds	**7** Payee Address; City; State; Zip 12728 FM729 Avinger, TX 75630
8 PURPOSE OF EXPENDITURE	**(a)** Category (See instructions for examples of acceptable categories) Event Expense
	(b) Description (See instructions regarding type of information required.) Building Rent.

Date	Payee name
02/11/2025	MIMS VFD Ladies Aux
Amount ($) 50.00 ☐ Expenditure from corporate funds	Payee Address; City; State; Zip 12728 FM729 Avinger, TX 75630
PURPOSE OF EXPENDITURE	**(a)** Category (See instructions for examples of acceptable categories) Event Expense
	(b) Description (See instructions regarding type of information required.) Building Rent.

Date	Payee name
03/11/2025	MIMS VFD Ladies Aux
Amount ($) 50.00 ☐ Expenditure from corporate funds	Payee Address; City; State; Zip 12728 FM729 Avinger, TX 75630
PURPOSE OF EXPENDITURE	**(a)** Category (See instructions for examples of acceptable categories) Event Expense
	(b) Description (See instructions regarding type of information required.) Building Rent

Date	Payee name
04/08/2025	MIMS VFD Ladies Aux
Amount ($) 50.00 ☐ Expenditure from corporate funds	Payee Address; City; State; Zip 12728 FM729 Avinger, TX 75630
PURPOSE OF EXPENDITURE	**(a)** Category (See instructions for examples of acceptable categories) Event Expense
	(b) Description (See instructions regarding type of information required.) Building Rent

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/2 Rpt: 5/5	**2** FILER NAME Marion County Republican Assembly	**3** Filer ID (Ethics Commission Filers) 00087740

4 Date 05/13/2025	**5** Payee name MIMS VFD Ladies Aux		
6 Amount ($) 50.00 ☐ Expenditure from corporate funds	**7** Payee Address; City; State; Zip 12728 FM729 Avinger, TX 75630		
8 **PURPOSE OF EXPENDITURE**	**(a)** Category (See instructions for examples of acceptable categories) Event Expense	**(b)** Description (See instructions regarding type of information required.) Building rent	

Date 06/09/2025	Payee name MIMS VFD Ladies Aux	
Amount ($) 50.00 ☐ Expenditure from corporate funds	Payee Address; City; State; Zip 12728 FM729 Avinger, TX 75630	
PURPOSE OF EXPENDITURE	**(a)** Category (See instructions for examples of acceptable categories) Event Expense	**(b)** Description (See instructions regarding type of information required.) Building rent.