FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00065855 3 COMMITTEE NAME **OFFICE USE ONLY** Northeast Tarrant County Republican Club Date Received **ELECTRONICALLY FILED** 11/01/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 4904 Wildwood Dr. Colleyville, TX 76034 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount John NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Brieger CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE TREASURER 4904 Wildwood Dr. STREET **ADDRESS** (Residence or Business) Colleyville, TX 76034 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 4904 Wildwood Dr. MAILING **ADDRESS** Colleyville, TX 76034 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (817) 713-0408 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 09/26/2025 10/25/2025

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer I	D (Ethics Commission Filers)
	ounty Republican Club		0006!	
		I a Commented	0000	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain				
paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location	7. Supported		
	of election and nature of issue.)			
		B. Opposed		
	Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION		POLITICAL CONTRIBUTIONS (OTHER THAN		
TOTALS		OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY)	9	\$ 410.00
	X check here if this report	qualifies for the higher itemization threshold		
		L CONTRIBUTIONS	ļ	\$ 722.52
	`	DGES, LOANS, OR GUARANTEES OF LOANS)		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	!	\$ 12.52
	4. TOTAL POLITICA	L EXPENDITURES	:	\$ 692.52
CONTRIBUTION	I	CONTRIBUTIONS MAINTAINED AS OF THE LAS	ST DAY	\$ 6 943 06
BALANCE	OF THE REPORTIN	G PERIOD		5 6,943.06
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS O REPORTING PERIOD	F THE :	\$ 0.00
6 AFFIDAVIT	L			
		I swear, or affirm, under penalty of true and correct and includes all in under Title 15, Election Code.		
		lok	nn Brieger	
		Signature of 0		reasurer
		Signature of C	Campaign	reasarer
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	oed before me, by the said _		_, this the	day
of	, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title	of officer administering oath
Signature of officer	aummotering valit	rimed name of officer administering oath	riue (or onicer aurillistering Uatri

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

3 of 6						
17 COM	IMITTE	E NAME	18 Filer ID	(Ethics Commission Filers)		
	heast	00065855	(
19 SCH	EDULE	SUBTOTALS		CURTOTAL AMOUNT		
NAM	E OF S	SUBTOTAL AMOUNT				
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 722.52			
2.		\$				
3.			\$			
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$		
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$		
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$		
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.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 692.52		
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$		
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/6		
2	FILER NAME Northeast Ta	R NAME neast Tarrant County Republican Club			3	Filer ID (Ethics Commission 00065855	n Filers)
4	Date 09/26/2025	 Full name of contributor out-of-state PAC (Bazan, Norma Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$41.98
_		Fort Worth, TX 76114	1-	- 40 1 1	<u> </u>		
8	Attorney	pation / Job title (See Instructions)	9	Employer (See Instructions Tarrant County	5)		
	Date 10/18/2025	Full name of contributor out-of-state PAC (Bazan, Norma Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$21.15
	Deinsinal assu	Fort Worth, TX 76114		Frankrija (Cara krativijatia na			
	Attorney	pation / Job title (See Instructions)		Employer (See Instructions Tarrant County	5)		
	Date 10/16/2025	Full name of contributor out-of-state PAC (Centracco, Linda Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$21.15
		Hurst, TX 76054					
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/20/2025	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$60.00
	Principal occu Unknown	Unknown, TX 76114 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 09/26/2025	Full name of contributor out-of-state PAC (Redburn, Shelby Contributor address; City; State; Zip Code Hurst, TX 76053)		Amount of Contribution (\$)	\$21.15
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions Robson Property Manag		nent	

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/6			
2	FILER NAME Northeast Ta	FILER NAME Northeast Tarrant County Republican Club			Filer ID (Ethics Commission 00065855	Filers)		
4	Date 10/14/2025	Full name of contributor)	7	Amount of Contribution (\$)	\$21.15		
_	Dringing Loon	North Richland Hills, TX 76148	D. Employer (See Instructions					
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions)				
	Date 10/20/2025	Full name of contributor out-of-state PAC (ID#:_ Tate, Frederick Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$62.81		
	Principal occu Managing Di	Colleyville, TX 76034 spation / Job title (See Instructions) irector	Employer (See Instructions CFO Shield, LLC)				
	Date Full name of contributor out-of-state PAC (ID#: 10/20/2025 Thompson, Karen Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$41.98		
		Colleyville, TX 76034						
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)				
	Date 10/20/2025	Full name of contributor out-of-state PAC (ID#:_ Woolley, Karen Contributor address; City; State; Zip Code Hurst, TX 76053			Amount of Contribution (\$)	\$21.15		
Principal occupation / Job title (See Instructions) Retired			Employer (See Instructions)				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 6/6	Northeast Tarrant County Republican Club 00065855
4 Date	5 Payee name
10/01/2025	Texas Star Golf Course and Conference Center
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$640.00	1400 Texas Star Parkway
Expenditure from	
corporate funds	Euless, TX 76040
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Facility rental and food
	. domy ronda and rood
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
10/01/2025	Texas Star Golf Course and Conference Center
Amount (\$)	Payee address; City; State; Zip Code
\$40.00	1400 Texas Star Parkway
Expenditure from corporate funds	Euless, TX 76040
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	1 000
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	