

**COUNTY EXECUTIVE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM CEC
COVER SHEET PG 1**

The CEC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00053162	2 Total pages filed: 180			
3 COMMITTEE NAME Collin County Republican Party (CEC)		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/11/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged				
4 COMMITTEE ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2701 W 15th Street Suite 572 Plano, TX 75075						
5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST James P.						
NICKNAME LAST Farley						
SUFFIX						
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 2213 Old Orchard Drive Plano, TX 75023			APT / SUITE #;	CITY;	STATE;
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; PO Box 260687 Plano, TX 75026	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE (214) 683-5388	PHONE NUMBER	EXTENSION			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final Report <input 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 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
11 ELECTION	ELECTION DATE Month 11/04/2025	Day	Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		

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**COUNTY EXECUTIVE COMMITTEE REPORT:
PURPOSE & TOTALS**

**FORM CEC
COVER SHEET PG 2**

12 COMMITTEE NAME Collin County Republican Party (CEC)		13 FILER ID (Ethics Commission Filer) 00053162
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 type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 2,859.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 53,298.97
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 86,881.80
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 49,824.72
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.

James P. Farley

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 - CEC**FORM CEC**
COVER SHEET PG 3
3 of 180

17 COMMITTEE NAME Collin County Republican Party (CEC)	18 Filer ID (Ethics Commission Filers) 00053162
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 53,298.97
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 86,881.80
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
10. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 72.37

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 1/111 Rpt: 4/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Carol	7 Amount of Contribution (\$) \$50.00	
	6 Contributor address; City; State; Zip Code Dallas, TX 75225		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired	
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) African American Republican Club	Amount of Contribution (\$) \$250.00	
	Contributor address; City; State; Zip Code Plano, TX 75074		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) self	
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Daniel Scott	Amount of Contribution (\$) \$123.89	
	Contributor address; City; State; Zip Code Dallas, TX 75252		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Julie	Amount of Contribution (\$) \$500.00	
	Contributor address; City; State; Zip Code Plano, TX 75086		
Principal occupation / Job title (See Instructions) realtor		Employer (See Instructions) Legacy Premier Group	
Date 07/02/2025			
Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bao, Lily			
Contributor address; City; State; Zip Code Plano, TX 75025			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 2/111 Rpt: 5/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bao, Lily 6 Contributor address; City; State; Zip Code Plano, TX 75025	7 Amount of Contribution (\$) \$10.00	
8 Principal occupation / Job title (See Instructions) realtor		9 Employer (See Instructions) Legacy Premier Group	
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bao, Lily Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$10.00	
Principal occupation / Job title (See Instructions) realtor		Employer (See Instructions) Legacy Premier Group	
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bao, Lily Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$10.00	
Principal occupation / Job title (See Instructions) realtor		Employer (See Instructions) Legacy Premier Group	
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bao, Lily Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$10.00	
Principal occupation / Job title (See Instructions) realtor		Employer (See Instructions) Legacy Premier Group	
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Stephani Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$25.00	
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: 3/111 Rpt: 6/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Mahvash	6 Contributor address; City; State; Zip Code McKinney, TX 75072	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) retired		
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Mahvash	Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired		
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Mahvash	Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired		
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Mahvash	Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired		
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Mahvash	Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			<p>1 Total pages Schedule A1: Sch: 4/111 Rpt: 7/180</p>
<p>2 FILER NAME Collin County Republican Party (CEC)</p>			<p>3 Filer ID (Ethics Commission Filers) 00053162</p>
<p>4 Date 11/28/2025</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Mahvash</p>	<p>6 Contributor address; City; State; Zip Code McKinney, TX 75072</p>	<p>7 Amount of Contribution (\$) \$10.00</p>
<p>8 Principal occupation / Job title (See Instructions) retired</p>		<p>9 Employer (See Instructions) retired</p>	
<p>Date 07/30/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergerson, Ashley</p>	<p>Contributor address; City; State; Zip Code Anna, TX 75409</p>	<p>Amount of Contribution (\$) \$10.00</p>
<p>Principal occupation / Job title (See Instructions) Marketing Director</p>		<p>Employer (See Instructions) College of Biomedical Equipment Technology</p>	
<p>Date 07/07/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergerson, Ashley</p>	<p>Contributor address; City; State; Zip Code Anna, TX 75409</p>	<p>Amount of Contribution (\$) \$25.00</p>
<p>Principal occupation / Job title (See Instructions) Investment Banking</p>		<p>Employer (See Instructions) SitusAMC</p>	
<p>Date 08/07/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergerson, Ashley</p>	<p>Contributor address; City; State; Zip Code Anna, TX 75409</p>	<p>Amount of Contribution (\$) \$25.00</p>
<p>Principal occupation / Job title (See Instructions) Investment Banking</p>		<p>Employer (See Instructions) SitusAMC</p>	
<p>Date 09/07/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergerson, Ashley</p>	<p>Contributor address; City; State; Zip Code Anna, TX 75409</p>	<p>Amount of Contribution (\$) \$25.00</p>
<p>Principal occupation / Job title (See Instructions) Investment Banking</p>		<p>Employer (See Instructions) SitusAMC</p>	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/111 Rpt: 8/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergerson, Ashley	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Anna, TX 75409	
8 Principal occupation / Job title (See Instructions) Marketing Director		9 Employer (See Instructions) College of Biomedical Equipment Technology
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergerson, Ashley	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Anna, TX 75409	
Principal occupation / Job title (See Instructions) Investment Banking		Employer (See Instructions) SitusAMC
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergerson, Ashley	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Anna, TX 75409	
Principal occupation / Job title (See Instructions) Marketing Director		Employer (See Instructions) College of Biomedical Equipment Technology
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergerson, Ashley	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Anna, TX 75409	
Principal occupation / Job title (See Instructions) Marketing Director		Employer (See Instructions) College of Biomedical Equipment Technology
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergerson, Ashley	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Anna, TX 75409	
Principal occupation / Job title (See Instructions) Investment Banking		Employer (See Instructions) SitusAMC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickford, Chris 6 Contributor address; City; State; Zip Code Allen, TX 75002	7 Amount of Contribution (\$) \$10.72
	8 Principal occupation / Job title (See Instructions) IT manager	9 Employer (See Instructions) BCBSTM
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickford, Chris Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$10.72
	Principal occupation / Job title (See Instructions) IT manager	Employer (See Instructions) BCBSTM
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickford, Chris Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$10.72
	Principal occupation / Job title (See Instructions) IT manager	Employer (See Instructions) BCBSTM
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickford, Chris Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$10.72
	Principal occupation / Job title (See Instructions) IT manager	Employer (See Instructions) BCBSTM
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickford, Chris Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$10.72
	Principal occupation / Job title (See Instructions) IT manager	Employer (See Instructions) BCBSTM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/111 Rpt: 10/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickford, Chris 6 Contributor address; City; State; Zip Code Allen, TX 75002	7 Amount of Contribution (\$) \$10.72
8 Principal occupation / Job title (See Instructions) IT manager		9 Employer (See Instructions) BCBSTM
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn, Patricia Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PBNJ Solutions LLC
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn, Patricia Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PBNJ Solutions LLC
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn, Patricia Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PBNJ Solutions LLC
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn, Patricia Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PBNJ Solutions LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/111 Rpt: 11/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn, Patricia	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Frisco, TX 75035	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) PBNJ Solutions LLC
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn, Patricia	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Frisco, TX 75035	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PBNJ Solutions LLC
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn, Patricia	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Frisco, TX 75035	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PBNJ Solutions LLC
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blencowe, Debra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Princeton, TX 75407	
Principal occupation / Job title (See Instructions) instructor		Employer (See Instructions) Collin College
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blencowe, Debra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Princeton, TX 75407	
Principal occupation / Job title (See Instructions) instructor		Employer (See Instructions) Collin College

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/111 Rpt: 12/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blencowe, Debra 6 Contributor address; City; State; Zip Code Princeton, TX 75407	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) instructor	9 Employer (See Instructions) Collin College
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blencowe, Debra Contributor address; City; State; Zip Code Princeton, TX 75407	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blencowe, Debra Contributor address; City; State; Zip Code Princeton, TX 75407	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blencowe, Debra Contributor address; City; State; Zip Code Princeton, TX 75407	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bollner, Dan Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$10.00
	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: 10/111 Rpt: 13/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bollner, Dan	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Frisco, TX 75034	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bollner, Dan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Frisco, TX 75034	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bollner, Dan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Frisco, TX 75034	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bollner, Dan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Frisco, TX 75034	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bollner, Dan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Frisco, TX 75034	
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: 11/111 Rpt: 14/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borgne, Sharon	6 Contributor address; City; State; Zip Code Plano, TX 75075	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) REALTOR		
9 Employer (See Instructions) Wm Davis Realty	Date 07/25/2025		
	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borgne, Sharon	Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REALTOR			Employer (See Instructions) Wm Davis Realty
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borgne, Sharon	Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) REALTOR		
Employer (See Instructions) Wm Davis Realty	Date 07/02/2025		
	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buettner, Russell	Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired			Employer (See Instructions) Retired
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buettner, Russell	Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Retired		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/111 Rpt: 15/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buettner, Russell 6 Contributor address; City; State; Zip Code McKinney, TX 75072	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) Retired	9 Employer (See Instructions) Retired
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buettner, Russell Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buettner, Russell Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buettner, Russell Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buettner, Russell Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$10.00
	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: 13/111 Rpt: 16/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burciaga, Rick	6 Contributor address; City; State; Zip Code Dallas, TX 75252-2516	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) Retired		
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burciaga, Rick	Employer (See Instructions) Retired	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Dallas, TX 75252-2516		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burciaga, Rick	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Dallas, TX 75252-2516		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burciaga, Rick	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Dallas, TX 75252-2516		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burciaga, Rick	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Dallas, TX 75252-2516		
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: 14/111 Rpt: 17/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burciaga, Rick	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75252-2516	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROMACK, RICHARD	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callahan, Michael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
Principal occupation / Job title (See Instructions) Agent		Employer (See Instructions) Callahan Insurance Agency LLC.
Date 07/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callahan, Michael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
Principal occupation / Job title (See Instructions) Agent		Employer (See Instructions) Callahan Insurance Agency LLC.
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callahan, Michael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
Principal occupation / Job title (See Instructions) Agent		Employer (See Instructions) Callahan Insurance Agency LLC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/111 Rpt: 18/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callahan, Michael	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Allen, TX 75013	
8 Principal occupation / Job title (See Instructions) Agent		9 Employer (See Instructions) Callahan Insurance Agency LLC.
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callahan, Michael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
Principal occupation / Job title (See Instructions) Agent		Employer (See Instructions) Callahan Insurance Agency LLC.
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callahan, Michael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
Principal occupation / Job title (See Instructions) Agent		Employer (See Instructions) Callahan Insurance Agency LLC.
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carey, Curtis	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassel, James	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richardson, TX 75080	
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions) self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 16/111 Rpt: 19/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassel, James	6 Contributor address; City; State; Zip Code Richardson, TX 75080	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) sales		
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassel, James	Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) sales		
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassel, James	Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) sales		
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassel, James	Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) sales		
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassel, James	Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) sales		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/111 Rpt: 20/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassel, James 6 Contributor address; City; State; Zip Code Richardson, TX 75080	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) sales		9 Employer (See Instructions) self employed
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassels, Jeff & Ann Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Web Developer		Employer (See Instructions) Perspecta
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassels, Jeff & Ann Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Web Developer		Employer (See Instructions) Perspecta
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassels, Jeff & Ann Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Web Developer		Employer (See Instructions) Perspecta
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassels, Jeff & Ann Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Web Developer		Employer (See Instructions) Perspecta

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/111 Rpt: 21/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassels, Jeff & Ann 6 Contributor address; City; State; Zip Code Plano, TX 75024	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) Web Developer	9 Employer (See Instructions) Perspecta
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassels, Jeff & Ann Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Web Developer	Employer (See Instructions) Perspecta
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Robert Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Robert Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Robert Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$10.00
	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: 19/111 Rpt: 22/180	
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162	
4 Date 09/02/2025	5 Full name of contributor Chambers, Robert	6 Contributor address; City; State; Zip Code FRISCO, TX 75034	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) retired		
Date 10/02/2025	Full name of contributor Chambers, Robert		Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code FRISCO, TX 75034		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 11/02/2025	Full name of contributor Chambers, Robert		Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code FRISCO, TX 75034		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 08/04/2025	Full name of contributor Chapman, David		Amount of Contribution (\$) \$26.30
	Contributor address; City; State; Zip Code Richardson, TX 75082		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 09/04/2025	Full name of contributor Chapman, David		Amount of Contribution (\$) \$26.30
	Contributor address; City; State; Zip Code Richardson, TX 75082		
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: 20/111 Rpt: 23/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/04/2025	5 Full name of contributor Chapman, David	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$26.30
	6 Contributor address; City; State; Zip Code Richardson, TX 75082		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired	
Date 11/04/2025	Full name of contributor Chapman, David	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$26.30
	Contributor address; City; State; Zip Code Richardson, TX 75082		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 12/04/2025	Full name of contributor Chapman, David	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$26.30
	Contributor address; City; State; Zip Code Richardson, TX 75082		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 08/08/2025	Full name of contributor Cheek, Paula	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Allen, TX 75013		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 07/02/2025	Full name of contributor Cix, Robert	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Prosper, TX 75078		
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) Aerius Management	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 21/111 Rpt: 24/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cix, Robert	6 Contributor address; City; State; Zip Code Prosper, TX 75078	7 Amount of Contribution (\$) \$100.00
	8 Principal occupation / Job title (See Instructions) Pilot		
9 Employer (See Instructions) Aerius Management			
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cix, Robert	Contributor address; City; State; Zip Code Prosper, TX 75078	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Pilot		
Employer (See Instructions) Aerius Management			
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cix, Robert	Contributor address; City; State; Zip Code Prosper, TX 75078	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Pilot		
Employer (See Instructions) Aerius Management			
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cix, Robert	Contributor address; City; State; Zip Code Prosper, TX 75078	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Pilot		
Employer (See Instructions) Aerius Management			
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cix, Robert	Contributor address; City; State; Zip Code Prosper, TX 75078	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Pilot		
Employer (See Instructions) Aerius Management			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/111 Rpt: 25/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conner Harrington Republican Women 6 Contributor address; City; State; Zip Code Plano, TX 75075	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) RCIS		9 Employer (See Instructions) methodist richardson medical center
Date 07/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Kenneth Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Railroad Commissioner		Employer (See Instructions) State of Texas
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craddick, Christi Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowell, Cynthia Contributor address; City; State; Zip Code Dallas, TX 75287-6705	Amount of Contribution (\$) \$26.30
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowell, Cynthia Contributor address; City; State; Zip Code Dallas, TX 75287-6705	Amount of Contribution (\$) \$26.30
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 23/111 Rpt: 26/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowell, Cynthia 6 Contributor address; City; State; Zip Code Dallas, TX 75287-6705	7 Amount of Contribution (\$) \$26.30	
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Self	
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowell, Cynthia Contributor address; City; State; Zip Code Dallas, TX 75287-6705	Amount of Contribution (\$) \$26.30	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self	
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowell, Cynthia Contributor address; City; State; Zip Code Dallas, TX 75287-6705	Amount of Contribution (\$) \$26.30	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self	
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Charles Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$10.00	
Principal occupation / Job title (See Instructions) Purchasing		Employer (See Instructions) Telecom Electric Supply	
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Charles Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$10.00	
Principal occupation / Job title (See Instructions) Purchasing		Employer (See Instructions) Telecom Electric Supply	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 24/111 Rpt: 27/180
2 FILER NAME Collin County Republican Party (CEC)				3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/18/2025	5 Full name of contributor Curry, Charles	<input type="checkbox"/> out-of-state PAC (ID#:)	7 Amount of Contribution (\$) \$10.00	
	6 Contributor address; City; State; Zip Code PLANO, TX 75023			
8 Principal occupation / Job title (See Instructions) Purchasing		9 Employer (See Instructions) Telecom Electric Supply		
Date 09/18/2025	Full name of contributor Curry, Charles	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code PLANO, TX 75023			
Principal occupation / Job title (See Instructions) Purchasing		Employer (See Instructions) Telecom Electric Supply		
Date 10/18/2025	Full name of contributor Curry, Charles	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code PLANO, TX 75023			
Principal occupation / Job title (See Instructions) Purchasing		Employer (See Instructions) Telecom Electric Supply		
Date 11/18/2025	Full name of contributor Curry, Charles	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code PLANO, TX 75023			
Principal occupation / Job title (See Instructions) Purchasing		Employer (See Instructions) Telecom Electric Supply		
Date 09/01/2025	Full name of contributor David, Stone	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code Kempner, TX 76539			
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: 25/111 Rpt: 28/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeSimone, Frank	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Plano, TX 75023	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denuszek, Terry and Andrea	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deptula, Darcy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Anna, TX 75409	
Principal occupation / Job title (See Instructions) Primary Operator / Owner		Employer (See Instructions) Self
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Anna, TX 75409	
Principal occupation / Job title (See Instructions) Primary Operator / Owner		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/111 Rpt: 29/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Brandon	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Anna, TX 75409	
8 Principal occupation / Job title (See Instructions) Primary Operator / Owner		9 Employer (See Instructions) Self
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diganvker, Jitendra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) Self employed
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diganvker, Jitendra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) Self employed
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diganvker, Jitendra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) Self employed
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diganvker, Jitendra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/111 Rpt: 30/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/01/2025	5 Full name of contributor Digantker, Jitendra	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code McKinney, TX 75071	
8 Principal occupation / Job title (See Instructions) Consulting		9 Employer (See Instructions) Self employed
Date 11/01/2025	Full name of contributor Digantker, Jitendra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) Self employed
Date 07/02/2025	Full name of contributor Dippell, Paul	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code PLANO, TX 75024	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Service Leadership Inc.
Date 07/06/2025	Full name of contributor Dippell, Paul	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code PLANO, TX 75024	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Service Leadership Inc.
Date 08/06/2025	Full name of contributor Dippell, Paul	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code PLANO, TX 75024	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Service Leadership Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 28/111 Rpt: 31/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dippell, Paul 6 Contributor address; City; State; Zip Code PLANO, TX 75024	7 Amount of Contribution (\$) \$10.00	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Service Leadership Inc.	
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dippell, Paul Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$10.00	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Service Leadership Inc.	
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dippell, Paul Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$10.00	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Service Leadership Inc.	
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don Huffines Campaign Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$1,500.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORRESTER, JEFFREY Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$50.00	
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: 29/111 Rpt: 32/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORRESTER, JEFFREY	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Wylie, TX 75098	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORRESTER, JEFFREY	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Wylie, TX 75098	\$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrer, James	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75023	\$120.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrer, Michelle	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75023	\$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Brian	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Frisco, TX 75035	\$100.00
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: 30/111 Rpt: 33/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flint, George 6 Contributor address; City; State; Zip Code Plano, TX 75075	7 Amount of Contribution (\$) \$100.00
	8 Principal occupation / Job title (See Instructions) Mediator/Arbitrator/Private Judge	9 Employer (See Instructions) Resolution Today LLC
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flint, George Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$300.00
	Principal occupation / Job title (See Instructions) District Judge	Employer (See Instructions) Collin County
Date 08/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flint, George Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Mediator/Arbitrator/Private Judge	Employer (See Instructions) Self
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flint, George Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Mediator/Arbitrator/Private Judge	Employer (See Instructions) Self
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flint, George Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Mediator/Arbitrator/Private Judge	Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/111 Rpt: 34/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flint, George	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code PLANO, TX 75075	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flint, George	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75075	
Principal occupation / Job title (See Instructions) Mediator/Arbitrator/Private Judge		Employer (See Instructions) Self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forrester, Jeff	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Wylie, TX 75098	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Alison	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Taylor, TX 76574	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gervasi, Gene GiGi	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Plano, TX 75074	
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: 32/111 Rpt: 35/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gervings, Josh	6 Contributor address; City; State; Zip Code Anna, TX 75409	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) Electrician/Trainer		
9 Employer (See Instructions) Modular Power Solutions	Date 07/13/2025		
	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gervings, Josh	Contributor address; City; State; Zip Code Anna, TX 75409	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Electrician/Trainer		Employer (See Instructions) Modular Power Solutions	
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gervings, Josh	Contributor address; City; State; Zip Code Anna, TX 75409	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Electrician/Trainer		
Employer (See Instructions) Modular Power Solutions	Date 09/13/2025		
	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gervings, Josh	Contributor address; City; State; Zip Code Anna, TX 75409	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Electrician/Trainer		Employer (See Instructions) Modular Power Solutions	
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gervings, Josh	Contributor address; City; State; Zip Code Anna, TX 75409	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Electrician/Trainer		
Employer (See Instructions) Modular Power Solutions			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 33/111 Rpt: 36/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/13/2025	5 Full name of contributor Gervin, Josh	<input type="checkbox"/> out-of-state PAC (ID#:)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Anna, TX 75409		
8 Principal occupation / Job title (See Instructions) Electrician/Trainer		9 Employer (See Instructions) Modular Power Solutions	
Date 07/12/2025	Full name of contributor Grady, Richard		Amount of Contribution (\$) \$10.69
	Contributor address; City; State; Zip Code Plano, TX 75025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 08/12/2025	Full name of contributor Grady, Richard		Amount of Contribution (\$) \$10.69
	Contributor address; City; State; Zip Code Plano, TX 75025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 09/12/2025	Full name of contributor Grady, Richard		Amount of Contribution (\$) \$10.69
	Contributor address; City; State; Zip Code Plano, TX 75025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 10/12/2025	Full name of contributor Grady, Richard		Amount of Contribution (\$) \$10.69
	Contributor address; City; State; Zip Code Plano, TX 75025		
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: 34/111 Rpt: 37/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grady, Richard	6 Contributor address; City; State; Zip Code Plano, TX 75025	7 Amount of Contribution (\$) \$10.69
	8 Principal occupation / Job title (See Instructions) Retired		
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grady, Richard	Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$10.69
	Principal occupation / Job title (See Instructions) Retired		
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grady, Rick	Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions) Retired		
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Pat	Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) retired		
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grigg, Scott	Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Tax Office Financial Operations Manager		
Employer (See Instructions) Collin County			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 35/111 Rpt: 38/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grigg, Scott	6 Contributor address; City; State; Zip Code McKinney, TX 75070	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) Tax Office Financial Operations Manager		
9 Employer (See Instructions) Collin County	Date 08/11/2025		
	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grigg, Scott	Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Commissioner		Employer (See Instructions) Collin County	
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grigg, Scott	Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Commissioner		
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grigg, Scott	Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Commissioner		
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grigg, Scott	Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Commissioner		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/111 Rpt: 39/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAVRANEK, DEBRA	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Allen, TX 75013	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagenbuch, Brent	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Little Elm, TX 75068	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Cathy	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Forney, TX 75126	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Joan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code MCKINNEY, TX 75071-7067	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Joan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code MCKINNEY, TX 75071-7067	
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: 37/111 Rpt: 40/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Joan	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code MCKINNEY, TX 75071-7067	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Joan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code MCKINNEY, TX 75071-7067	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Milton	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Mckinney, TX 75072	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Milton	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Mckinney, TX 75072	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Milton	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Mckinney, TX 75072	
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: 38/111 Rpt: 41/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Milton	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Mckinney, TX 75072	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Milton	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mckinney, TX 75072	\$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Milton	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mckinney, TX 75072	\$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henke, Deborah	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75075	\$124.20
Principal occupation / Job title (See Instructions) Real Estate Appraiser		Employer (See Instructions) Self
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Byron	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Prosper, TX 75078	\$7,500.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/111 Rpt: 42/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Mari	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code Prosper, TX 75078	
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) N/A
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Chris	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code McKinney, TX 75070	
Principal occupation / Job title (See Instructions) County Judge		Employer (See Instructions) Collin County
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Henry	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Frisco, TX 75034	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Corbett	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Celina, TX 75009	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Celina Economic Development Corporation
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Corbett	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Celina, TX 75009	
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: 40/111 Rpt: 43/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Corbett	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Celina, TX 75009	
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) Celina Economic Development Corporation
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Corbett	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Celina, TX 75009	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Corbett	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Celina, TX 75009	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Corbett	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Celina, TX 75009	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffines, Woody	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75287	
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: 41/111 Rpt: 44/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huneycutt, Mike 6 Contributor address; City; State; Zip Code Plano, TX 75075	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) traxtion	9 Employer (See Instructions) traxtion
Date 09/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huneycutt, Mike Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) traxtion	Employer (See Instructions) traxtion
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huneycutt, Teri Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) engineer	Employer (See Instructions) Planmeca
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huneycutt, Teri Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huneycutt, Teri Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$10.00
	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: 42/111 Rpt: 45/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jack Ryan Gallagher Campaign	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code Plano, TX 75025	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: James, Elizabeth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Anna, TX 75409	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Lewisville ISD
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jenkins, Bernard	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75023	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Lewisville ISD
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jenkins, Bernard	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75023	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Lewisville ISD
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jenkins, Bernard	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75023	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Lewisville ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 43/111 Rpt: 46/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Bernard	7 Amount of Contribution (\$) \$10.00	
	6 Contributor address; City; State; Zip Code Plano, TX 75023		
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Lewisville ISD	
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Bernard	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Plano, TX 75023		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Lewisville ISD	
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Bernard	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Plano, TX 75023		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Lewisville ISD	
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Jensen	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code McKinney, TX 75070		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Eric	Amount of Contribution (\$) \$381.90	
	Contributor address; City; State; Zip Code Dallas, TX 75218		
Principal occupation / Job title (See Instructions) Mayor		Employer (See Instructions) City of Dallas	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/111 Rpt: 47/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jennifer	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75238	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kelly	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Self
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kelly	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Self
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kelly	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Self
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kelly	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/111 Rpt: 48/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kelly	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Plano, TX 75093	
8 Principal occupation / Job title (See Instructions) Office Manager		9 Employer (See Instructions) Self
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kelly	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Self
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kelly	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Self
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Randell	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Randell	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/111 Rpt: 49/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Randell	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Plano, TX 75093	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Randell	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Randell	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Randell	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Randell	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/111 Rpt: 50/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Randy	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code Plano, TX 75026	
8 Principal occupation / Job title (See Instructions) District Judge		9 Employer (See Instructions) Collin County
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kakaska, Gwendolyn C	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Farmersville, TX 75442	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallad, Stephen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code McKinney, TX 75070	
Principal occupation / Job title (See Instructions) Remodeling		Employer (See Instructions) None ya
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallad, Stephen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code McKinney, TX 75070	
Principal occupation / Job title (See Instructions) Remodeling		Employer (See Instructions) None ya
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallad, Stephen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code McKinney, TX 75070	
Principal occupation / Job title (See Instructions) Remodeling		Employer (See Instructions) None ya

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SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 48/111 Rpt: 51/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallad, Stephen	7 Amount of Contribution (\$) \$10.00	
	6 Contributor address; City; State; Zip Code McKinney, TX 75070		
8 Principal occupation / Job title (See Instructions) Remodeling		9 Employer (See Instructions) None ya	
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallad, Stephen	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code McKinney, TX 75070		
Principal occupation / Job title (See Instructions) Remodeling		Employer (See Instructions) None ya	
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallad, Stephen	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code McKinney, TX 75070		
Principal occupation / Job title (See Instructions) Remodeling		Employer (See Instructions) None ya	
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katrina Pierson Campaign	Amount of Contribution (\$) \$300.00	
	Contributor address; City; State; Zip Code Rockwall, TX 75087-0672		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kemp, David	Amount of Contribution (\$) \$260.05	
	Contributor address; City; State; Zip Code Plano, TX 75024		
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: 49/111 Rpt: 52/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kemp, Stacey	7 Amount of Contribution (\$) \$120.00
	6 Contributor address; City; State; Zip Code MCKINNEY, TX 75071	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klement, Chris	Amount of Contribution (\$) \$26.30
	Contributor address; City; State; Zip Code Dallas, TX 75231	
Principal occupation / Job title (See Instructions) Oldham Klement and Noga PLLC		Employer (See Instructions) Oldham Klement and Noga PLLC
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klement, Chris	Amount of Contribution (\$) \$26.30
	Contributor address; City; State; Zip Code Dallas, TX 75231	
Principal occupation / Job title (See Instructions) Oldham Klement and Noga PLLC		Employer (See Instructions) Oldham Klement and Noga PLLC
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klement, Chris	Amount of Contribution (\$) \$26.30
	Contributor address; City; State; Zip Code Dallas, TX 75231	
Principal occupation / Job title (See Instructions) Oldham Klement and Noga PLLC		Employer (See Instructions) Oldham Klement and Noga PLLC
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klement, Chris	Amount of Contribution (\$) \$26.30
	Contributor address; City; State; Zip Code Dallas, TX 75231	
Principal occupation / Job title (See Instructions) Oldham Klement and Noga PLLC		Employer (See Instructions) Oldham Klement and Noga PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 50/111 Rpt: 53/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klement, Chris 6 Contributor address; City; State; Zip Code Dallas, TX 75231	7 Amount of Contribution (\$) \$26.30	
8 Principal occupation / Job title (See Instructions) Oldham Klement and Noga PLLC		9 Employer (See Instructions) Oldham Klement and Noga PLLC	
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Konkel, Joan Contributor address; City; State; Zip Code Plano, TX 74074	Amount of Contribution (\$) \$10.00	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Konkel, Joan Contributor address; City; State; Zip Code Plano, TX 74074	Amount of Contribution (\$) \$10.00	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Konkel, Joan Contributor address; City; State; Zip Code Plano, TX 74074	Amount of Contribution (\$) \$10.00	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Konkel, Joan Contributor address; City; State; Zip Code Plano, TX 74074	Amount of Contribution (\$) \$10.00	
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: 51/111 Rpt: 54/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreitman, Lori	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Plano, TX 75024	
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) Self
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreitman, Lori	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreitman, Lori	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreitman, Lori	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreitman, Lori	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/111 Rpt: 55/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreitman, Lori	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Plano, TX 75024	
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) Self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuykendall, Dusty	Amount of Contribution (\$) \$26.27
	Contributor address; City; State; Zip Code Lucas, TX 75002	
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) The Next Solutions Inc
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuykendall, Dusty	Amount of Contribution (\$) \$26.27
	Contributor address; City; State; Zip Code Lucas, TX 75002	
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) The Next Solutions Inc
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuykendall, Dusty	Amount of Contribution (\$) \$26.27
	Contributor address; City; State; Zip Code Lucas, TX 75002	
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) The Next Solutions Inc
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuykendall, Dusty	Amount of Contribution (\$) \$26.27
	Contributor address; City; State; Zip Code Lucas, TX 75002	
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) The Next Solutions Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/111 Rpt: 56/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuykendall, Dusty	7 Amount of Contribution (\$) \$26.27
	6 Contributor address; City; State; Zip Code Lucas, TX 75002	
8 Principal occupation / Job title (See Instructions) CFO		9 Employer (See Instructions) The Next Solutions Inc
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuykendall, Dusty	Amount of Contribution (\$) \$26.27
	Contributor address; City; State; Zip Code Lucas, TX 75002	
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) The Next Solutions Inc
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamb, Phillip	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75025	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laseter, Kimberly	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Prosper, TX 75078	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laverenz, Terry	Amount of Contribution (\$) \$10.69
	Contributor address; City; State; Zip Code Lucas, TX 75002	
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: 54/111 Rpt: 57/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laverenz, Terry 6 Contributor address; City; State; Zip Code Lucas, TX 75002	7 Amount of Contribution (\$) \$10.69
	8 Principal occupation / Job title (See Instructions) Retired	9 Employer (See Instructions) Retired
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laverenz, Terry Contributor address; City; State; Zip Code Lucas, TX 75002	Amount of Contribution (\$) \$10.69
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laverenz, Terry Contributor address; City; State; Zip Code Lucas, TX 75002	Amount of Contribution (\$) \$10.69
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laverenz, Terry Contributor address; City; State; Zip Code Lucas, TX 75002	Amount of Contribution (\$) \$10.69
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laverenz, Terry Contributor address; City; State; Zip Code Lucas, TX 75002	Amount of Contribution (\$) \$10.69
	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: 55/111 Rpt: 58/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lethe, David	7 Amount of Contribution (\$) \$10.00	
	6 Contributor address; City; State; Zip Code Plano, TX 75025		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired	
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lethe, David	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Plano, TX 75025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lethe, David	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Plano, TX 75025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lethe, David	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Plano, TX 75025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lethe, David	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Plano, TX 75025		
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: 56/111 Rpt: 59/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lethe, David	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Plano, TX 75025	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leyrer, Ellen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leyrer, Ellen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leyrer, Ellen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leyrer, Ellen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75023	
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: 57/111 Rpt: 60/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leyrer, Ellen	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Plano, TX 75023	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leyrer, Ellen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leyrer, Ellen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Brian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richardson, TX 75082	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) McDermott Williams & Schulte
Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Brian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richardson, TX 75082	
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) McDermott Will & Shulte

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/111 Rpt: 61/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Brian	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Richardson, TX 75082	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) McDermott Will & Shulte
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Brian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richardson, TX 75082	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) McDermott Will & Schulte
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwig, Kim	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75025	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwig, Kim	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75025	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ludwig, Kim	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75025	
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: 59/111 Rpt: 62/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/17/2025	5 Full name of contributor Ludwig, Kim	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Plano, TX 75025	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/17/2025	Full name of contributor Ludwig, Kim	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75025	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/17/2025	Full name of contributor Ludwig, Kim	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75025	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/22/2025	Full name of contributor MCCAHHON, A. T	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Plano, TX 75025	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/02/2025	Full name of contributor Madden, Mike	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code McKinney, TX 75070	
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: 60/111 Rpt: 63/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Mike	6 Contributor address; City; State; Zip Code McKinney, TX 75070	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) Retired		
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Mike	Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Retired		
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Mike	Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired		
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Mike	Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Purchasing		
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Mike	Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired		

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/111 Rpt: 64/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Patrick 6 Contributor address; City; State; Zip Code McKinney, TX 75070	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) Retired	9 Employer (See Instructions) Retired
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Patrick Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Patrick Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Patrick Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Patrick Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
	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: 62/111 Rpt: 65/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Patrick 6 Contributor address; City; State; Zip Code McKinney, TX 75070	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) retired	9 Employer (See Instructions) retired
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Maryjane Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Maryjane Contributor address; City; State; Zip Code Van Alstyne, TX 75495	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Maryjane Contributor address; City; State; Zip Code Van Alstyne, TX 75495	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Maryjane Contributor address; City; State; Zip Code Van Alstyne, TX 75495	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 63/111 Rpt: 66/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/16/2025	5 Full name of contributor McCoy, Lynn	<input type="checkbox"/> out-of-state PAC (ID#:)	7 Amount of Contribution (\$) \$10.72
	6 Contributor address; City; State; Zip Code Plano, TX 75023		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired	
Date 08/16/2025	Full name of contributor McCoy, Lynn	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$10.72
	Contributor address; City; State; Zip Code Plano, TX 75023		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 09/16/2025	Full name of contributor McCoy, Lynn	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$10.72
	Contributor address; City; State; Zip Code Plano, TX 75023		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 10/16/2025	Full name of contributor McCoy, Lynn	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$10.72
	Contributor address; City; State; Zip Code Plano, TX 75023		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 11/16/2025	Full name of contributor McCoy, Lynn	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$10.72
	Contributor address; City; State; Zip Code Plano, TX 75023		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/111 Rpt: 67/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/16/2025	5 Full name of contributor McCoy, Lynn	7 Amount of Contribution (\$) \$10.72
	6 Contributor address; City; State; Zip Code Plano, TX 75023	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/28/2025	Full name of contributor McManaman, Brandi	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75287	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/05/2025	Full name of contributor McNamara, Denise	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Dallas, TX 75231	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/07/2025	Full name of contributor Midgley, Denise	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75075	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 10/27/2025	Full name of contributor Miles, John	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code McKinney, TX 75070	
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: 65/111 Rpt: 68/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Sid	7 Amount of Contribution (\$) \$450.00
	6 Contributor address; City; State; Zip Code Stephenville, TX 76401	
8 Principal occupation / Job title (See Instructions) Agriculture Director		9 Employer (See Instructions) State of Texas
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Missildine, Michael	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Missildine, Michael	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75075	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffatt, Michel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Celina, TX 75009	
Principal occupation / Job title (See Instructions) Coach and Engineer		Employer (See Instructions) Unemployed
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffatt, Michel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Celina, TX 75009	
Principal occupation / Job title (See Instructions) Coach and Engineer		Employer (See Instructions) Unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/111 Rpt: 69/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffatt, Michel	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Celina, TX 75009	
8 Principal occupation / Job title (See Instructions) Coach and Engineer		9 Employer (See Instructions) Unemployed
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffatt, Michel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Celina, TX 75009	
Principal occupation / Job title (See Instructions) Coach and Engineer		Employer (See Instructions) Unemployed
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffatt, Michel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Celina, TX 75009	
Principal occupation / Job title (See Instructions) Coach and Engineer		Employer (See Instructions) Unemployed
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffatt, Michel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Celina, TX 75009	
Principal occupation / Job title (See Instructions) Coach and Engineer		Employer (See Instructions) Unemployed
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montes, Alejandra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
Principal occupation / Job title (See Instructions) GC		Employer (See Instructions) Self employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/111 Rpt: 70/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montes, Alejandra 6 Contributor address; City; State; Zip Code McKinney, TX 75071	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) GC		9 Employer (See Instructions) Self employed
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Katherine Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Katherine Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Katherine Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Katherine Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/111 Rpt: 71/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Katherine	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code MCKINNEY, TX 75071	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Katherine	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code MCKINNEY, TX 75071	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nana, Freddy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Wylie, TX 75098	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathan Sheets Campaign	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noble, Candy	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 69/111 Rpt: 72/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nored, Lynn	6 Contributor address; City; State; Zip Code McKinney, TX 75071	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) retired		
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nored, Lynn	Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired		
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nored, Lynn	Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired		
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nored, Lynn	Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired		
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nored, Lynn	Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired		

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SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 70/111 Rpt: 73/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nored, Lynn 6 Contributor address; City; State; Zip Code McKinney, TX 75071	7 Amount of Contribution (\$) \$10.00	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired	
Date 08/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nowak, Tom Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$300.00	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Chuck Contributor address; City; State; Zip Code PLANO TX , TX 75023	Amount of Contribution (\$) \$100.00	
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) The O'Reilly Group LLC	
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Chuck Contributor address; City; State; Zip Code PLANO TX, TX 75023	Amount of Contribution (\$) \$100.00	
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) The O'Reilly Group LLC	
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Chuck Contributor address; City; State; Zip Code PLANO TX, TX 75023	Amount of Contribution (\$) \$100.00	
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) The O'Reilly Group LLC	

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/111 Rpt: 74/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Chuck	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code PLANO TX, TX 75023	
8 Principal occupation / Job title (See Instructions) owner		9 Employer (See Instructions) The O'Reilly Group LLC
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Chuck	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75023	
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) The O'Reilly Group LLC
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Chuck	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75023	
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) The O'Reilly Group LLC
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrander, Peggy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padilla, Michael	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Murphy, TX 75094	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/111 Rpt: 75/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Pinalkumar 6 Contributor address; City; State; Zip Code Allen, TX 75002	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) Advisory	9 Employer (See Instructions) Shiva Ram LLC
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Pinalkumar Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Advisory	Employer (See Instructions) Shiva Ram LLC
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Pinalkumar Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Advisory	Employer (See Instructions) Shiva Ram LLC
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Pinalkumar Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Advisory	Employer (See Instructions) Shiva Ram LLC
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Pinalkumar Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Advisory	Employer (See Instructions) Shiva Ram LLC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/111 Rpt: 76/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Pinalkumar 6 Contributor address; City; State; Zip Code Allen, TX 75002	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Advisory		9 Employer (See Instructions) Shiva Ram LLC
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Sheila Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ponce, Jennifer Contributor address; City; State; Zip Code Celina, TX 75009	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, Keresa Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) State of Texas
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, Keresa Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Representative		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: 74/111 Rpt: 77/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raley, Lori	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Plano, TX 75024	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Clay	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75075	
Principal occupation / Job title (See Instructions) Information Security		Employer (See Instructions) HMS Inc
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Clay	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75075	
Principal occupation / Job title (See Instructions) Information Security		Employer (See Instructions) HMS Inc
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Clay	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75075	
Principal occupation / Job title (See Instructions) Information Security		Employer (See Instructions) HMS Inc
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Clay	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75075	
Principal occupation / Job title (See Instructions) Information Security		Employer (See Instructions) HMS Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/111 Rpt: 78/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Clay	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Plano, TX 75075	
8 Principal occupation / Job title (See Instructions) Information Security		9 Employer (See Instructions) HMS Inc
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Clay	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75075	
Principal occupation / Job title (See Instructions) Information Security		Employer (See Instructions) HMS Inc
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Jim	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Celina, TX 75009	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Sue	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code FAIRVIEW, TX 75069	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Republican Club at Heritage Ranch	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Fairview, TX 75069	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/111 Rpt: 79/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, David	7 Amount of Contribution (\$) \$120.00
	6 Contributor address; City; State; Zip Code Plano, TX 75093	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Nannette	Amount of Contribution (\$) \$10.59
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) DoctorLogic
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Nannette	Amount of Contribution (\$) \$10.59
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) DoctorLogic
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Nannette	Amount of Contribution (\$) \$10.59
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) DoctorLogic
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Nannette	Amount of Contribution (\$) \$10.59
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) DoctorLogic

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/111 Rpt: 80/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Nannette	7 Amount of Contribution (\$) \$10.59
	6 Contributor address; City; State; Zip Code Allen, TX 75002	
8 Principal occupation / Job title (See Instructions) CFO		9 Employer (See Instructions) DoctorLogic
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Nannette	Amount of Contribution (\$) \$10.59
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) DoctorLogic
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Nannette	Amount of Contribution (\$) \$10.59
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) DoctorLogic
Date 08/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Nancy Pickens	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code McKinney, TX 75070	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Dale	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
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: 78/111 Rpt: 81/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rovner, ivan	6 Contributor address; City; State; Zip Code PLANO, TX 75025	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) physician		
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rovner, ivan	Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) physician		
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rovner, ivan	Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) physician		
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rovner, ivan	Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) physician		
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rovner, ivan	Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) physician		

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/111 Rpt: 82/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rovner, ivan	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code PLANO, TX 75025	
8 Principal occupation / Job title (See Instructions) physician		9 Employer (See Instructions) self
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudd, Daniel	Amount of Contribution (\$) \$21.12
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudd, Daniel	Amount of Contribution (\$) \$21.12
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudd, Daniel	Amount of Contribution (\$) \$21.12
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudd, Daniel	Amount of Contribution (\$) \$21.12
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 80/111 Rpt: 83/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/25/2025	5 Full name of contributor Rudd, Daniel	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$21.12
	6 Contributor address; City; State; Zip Code Plano, TX 75093		
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self	
Date 12/25/2025	Full name of contributor Rudd, Daniel	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$21.12
	Contributor address; City; State; Zip Code Plano, TX 75093		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self	
Date 07/02/2025	Full name of contributor Sakai, Kyle	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Celina, TX 75009		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Denton ISD	
Date 07/06/2025	Full name of contributor Sakai, Kyle	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Celina, TX 75009		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Denton ISD	
Date 08/06/2025	Full name of contributor Sakai, Kyle	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Celina, TX 75009		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Denton ISD	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/111 Rpt: 84/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sakai, Kyle	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Celina, TX 75009	
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) Denton ISD
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sardo, Pamela	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Josephine, TX 75173	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayegh, Matthew	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Mckinney, TX 75071	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwerin, Michael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Wylie, TX 75098	
Principal occupation / Job title (See Instructions) Nonprofit Fundraiser		Employer (See Instructions) Self
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwerin, Michael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Wylie, TX 75098	
Principal occupation / Job title (See Instructions) Nonprofit Fundraiser		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/111 Rpt: 85/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwerin, Michael	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Wylie, TX 75098	
8 Principal occupation / Job title (See Instructions) Nonprofit Fundraiser		9 Employer (See Instructions) Self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwerin, Michael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Wylie, TX 75098	
Principal occupation / Job title (See Instructions) Nonprofit Fundraiser		Employer (See Instructions) Self
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwerin, Michael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Wylie, TX 75098	
Principal occupation / Job title (See Instructions) Nonprofit Fundraiser		Employer (See Instructions) Self
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwerin, Michael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Wylie, TX 75098	
Principal occupation / Job title (See Instructions) Nonprofit Fundraiser		Employer (See Instructions) Self
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwerin, Michael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Wylie, TX 75098	
Principal occupation / Job title (See Instructions) Nonprofit Fundraiser		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/111 Rpt: 86/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Semanek, Daniel	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Allen, TX 75002	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Legal Aid
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Semanek, Daniel	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Allen, TX 75002	\$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Legal Aid
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Semanek, Daniel	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Allen, TX 75002	\$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Legal Aid
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Semanek, Daniel	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Allen, TX 75002	\$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Legal Aid
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Semanek, Daniel	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Allen, TX 75002	\$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Legal Aid

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/111 Rpt: 87/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Semanek, Daniel	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Allen, TX 75002	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Legal Aid
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Semanek, Daniel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Legal Aid
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shafer, David	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
Principal occupation / Job title (See Instructions) Preferred Intelligence		Employer (See Instructions) Preferred Intelligence
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shafer, David	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
Principal occupation / Job title (See Instructions) Preferred Intelligence		Employer (See Instructions) Preferred Intelligence
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shafer, David	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
Principal occupation / Job title (See Instructions) Preferred Intelligence		Employer (See Instructions) Preferred Intelligence

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/111 Rpt: 88/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shafer, David	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Allen, TX 75013	
8 Principal occupation / Job title (See Instructions) Preferred Intelligence		9 Employer (See Instructions) Preferred Intelligence
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shafer, David	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Allen, TX 75013	\$10.00
Principal occupation / Job title (See Instructions) Preferred Intelligence		Employer (See Instructions) Preferred Intelligence
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheets, Nathan	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Frisco, TX 75035	\$1,039.33
Principal occupation / Job title (See Instructions) Entrepeneur		Employer (See Instructions) Honey Rock Group
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheffield, Eric	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75074	\$400.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shoemaker, Jacob	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75093	\$26.30
Principal occupation / Job title (See Instructions) CG Infinity		Employer (See Instructions) CG Infinity

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/111 Rpt: 89/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shoemaker, Jacob	7 Amount of Contribution (\$) \$26.30
	6 Contributor address; City; State; Zip Code Plano, TX 75093	
8 Principal occupation / Job title (See Instructions) CG Infinity		9 Employer (See Instructions) CG Infinity
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shoemaker, Jacob	Amount of Contribution (\$) \$26.30
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) CG Infinity		Employer (See Instructions) CG Infinity
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shoemaker, Jarad	Amount of Contribution (\$) \$26.30
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) CG Infinity		Employer (See Instructions) CG Infinity
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shoemaker, Jared	Amount of Contribution (\$) \$26.30
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) CG Infinity		Employer (See Instructions) CG Infinity
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sickler, Dana	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
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: 87/111 Rpt: 90/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sickler, Dana	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Plano, TX 75024	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sickler, Dana	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sickler, Dana	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sickler, Dana	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sickler, Dana	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
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: 88/111 Rpt: 91/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Floyd	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Plano, TX 75074	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Floyd	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75074	\$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Floyd	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75074	\$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Floyd	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75074	\$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Floyd	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75074	\$10.00
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: 89/111 Rpt: 92/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Floyd	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Plano, TX 75074	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Floyd	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75074	\$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singleton Sr., Sharmarr	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75231	\$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slaughter, Michael	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code McKinney, TX 75069	\$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self Employed
Date 07/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slaughter, Michael	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code McKinney, TX 75069	\$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/111 Rpt: 93/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/06/2025	5 Full name of contributor Slaughter, Michael	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code McKinney, TX 75069	
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self Employed
Date 08/06/2025	Full name of contributor Slaughter, Michael	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code McKinney, TX 75069	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self Employed
Date 09/06/2025	Full name of contributor Slaughter, Michael	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code McKinney, TX 75069	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self Employed
Date 10/06/2025	Full name of contributor Slaughter, Michael	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code McKinney, TX 75069	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self Employed
Date 11/06/2025	Full name of contributor Slaughter, Michael	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code McKinney, TX 75069	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/111 Rpt: 94/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/23/2025	5 Full name of contributor Slaughter, Michael	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code McKinney, TX 75069	
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self Employed
Date 07/02/2025	Full name of contributor Smith, TL	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/20/2025	Full name of contributor Smith, TL	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/20/2025	Full name of contributor Smith, TL	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/20/2025	Full name of contributor Smith, TL	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
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: 92/111 Rpt: 95/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, TL	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Plano, TX 75024	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Tom	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Addison, TX 75001	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Marilyn	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Marilyn	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Marilyn	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
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: 93/111 Rpt: 96/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Marilyn	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Allen, TX 75013	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Marilyn	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Marilyn	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steere, Challen	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Pottsboro, TX 75076	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steere, Challen	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Pottsboro, TX 75076	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/111 Rpt: 97/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Syken, Matthew	7 Amount of Contribution (\$) \$104.23
	6 Contributor address; City; State; Zip Code Frisco, TX 75033	
8 Principal occupation / Job title (See Instructions) Noble 33 TMG		9 Employer (See Instructions) Noble 33 TMG
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tellier, Loretta	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, Debbie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, Debbie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, Debbie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
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: 95/111 Rpt: 98/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, Debbie	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code McKinney, TX 75071	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, Debbie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, Debbie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorsen, Matt	Amount of Contribution (\$) \$26.33
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) The Dallas Shutter Company
Date 08/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorsen, Matt	Amount of Contribution (\$) \$26.33
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) The Dallas Shutter Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/111 Rpt: 99/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorsen, Matt	7 Amount of Contribution (\$) \$26.33
	6 Contributor address; City; State; Zip Code Allen, TX 75002	
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) The Dallas Shutter Company
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorsen, Matt	Amount of Contribution (\$) \$26.33
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) The Dallas Shutter Company
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorsen, Matt	Amount of Contribution (\$) \$26.33
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) The Dallas Shutter Company
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorsen, Matt	Amount of Contribution (\$) \$26.33
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) The Dallas Shutter Company
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorsen, Matt and Alisha	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Melissa, TX 75454	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 97/111 Rpt: 100/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tu, Maria 6 Contributor address; City; State; Zip Code Plano, TX 75025	7 Amount of Contribution (\$) \$50.00	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Law Offices of Maria Tu	
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tu, Maria Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$50.00	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Maria Tu	
Date 09/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tu, Maria Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$50.00	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Maria Tu	
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tu, Maria Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$50.00	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Maria Tu	
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tu, Maria Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$50.00	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Maria Tu	

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/111 Rpt: 101/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tu, Maria 6 Contributor address; City; State; Zip Code Plano, TX 75025	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Law Offices of Maria Tu
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Utterback, Evan Contributor address; City; State; Zip Code Royse City, TX 75189	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Client Advisor		Employer (See Instructions) CC CIS
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Utterback, Evan Contributor address; City; State; Zip Code Royse City, TX 75189	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Client Advisor		Employer (See Instructions) CC CIS
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Utterback, Evan Contributor address; City; State; Zip Code Royse City, TX 75189	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Client Advisor		Employer (See Instructions) CC CIS
Date 09/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Utterback, Evan Contributor address; City; State; Zip Code Royse City, TX 75189	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Client Advisor		Employer (See Instructions) CC CIS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/111 Rpt: 102/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Utterback, Evan	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Royse City, TX 75189	
8 Principal occupation / Job title (See Instructions) Client Advisor		9 Employer (See Instructions) CCCIS
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Utterback, Evan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Royse City, TX 75189	
Principal occupation / Job title (See Instructions) Client Advisor		Employer (See Instructions) CCCIS
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vick, John	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Canton, TX 75103	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Terry	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75023	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Collin County Republican Prty
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallis, Michael	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Richardson, TX 75082	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Air supply

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/111 Rpt: 103/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/04/2025	5 Full name of contributor Wallis, Michael 6 Contributor address; City; State; Zip Code Richardson, TX 75082	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Air supply
Date 08/04/2025	Full name of contributor Wallis, Michael Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Air supply
Date 09/04/2025	Full name of contributor Wallis, Michael Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Air supply
Date 10/04/2025	Full name of contributor Wallis, Michael Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Air supply
Date 11/04/2025	Full name of contributor Wallis, Michael Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Air supply

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SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 101/111 Rpt: 104/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Tammy	7 Amount of Contribution (\$) \$10.00	
	6 Contributor address; City; State; Zip Code McKinney, TX 75070		
8 Principal occupation / Job title (See Instructions) Executive Assistant		9 Employer (See Instructions) Emerson	
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Tammy	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code McKinney, TX 75070		
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) Emerson	
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Tammy	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code McKinney, TX 75070		
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) Emerson	
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasserman, Mary	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code Plano, TX 75075		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Cody	Amount of Contribution (\$) \$150.00	
	Contributor address; City; State; Zip Code Plano, TX 75023		
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self	

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/111 Rpt: 105/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/02/2025	5 Full name of contributor Weaver, Staci	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Plano, TX 75075	
8 Principal occupation / Job title (See Instructions) Superintendent		9 Employer (See Instructions) Legacy Preparatory Charter Acad
Date 07/24/2025	Full name of contributor Weaver, Staci	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75075	
Principal occupation / Job title (See Instructions) Superintendent		Employer (See Instructions) Legacy Preparatory Charter Acad
Date 08/24/2025	Full name of contributor Weaver, Staci	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75075	
Principal occupation / Job title (See Instructions) Superintendent		Employer (See Instructions) Legacy Preparatory Charter Acad
Date 09/24/2025	Full name of contributor Weaver, Staci	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75075	
Principal occupation / Job title (See Instructions) Superintendent		Employer (See Instructions) Legacy Preparatory Charter Acad
Date 07/02/2025	Full name of contributor Webb, Duncan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code PLANO, TX 75093	
Principal occupation / Job title (See Instructions) Commissioner		Employer (See Instructions) Collin County

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/111 Rpt: 106/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/10/2025	5 Full name of contributor Webb, Duncan	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code PLANO, TX 75093	
8 Principal occupation / Job title (See Instructions) Commissioner		9 Employer (See Instructions) Collin County
Date 07/02/2025	Full name of contributor West, Jerry	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code MCKINNEY, TX 75072	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/28/2025	Full name of contributor West, Jerry	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code MCKINNEY, TX 75072	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/28/2025	Full name of contributor West, Jerry	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code MCKINNEY, TX 75072	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/05/2025	Full name of contributor West, Jerry	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code MCKINNEY, TX 75072	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/111 Rpt: 107/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Jerry	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code MCKINNEY, TX 75072	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Jerry	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code MCKINNEY, TX 75072	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westberg, Trina	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westberg, Trina	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westberg, Trina	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75074	
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: 105/111 Rpt: 108/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westberg, Trina	7 Amount of Contribution (\$) \$10.00	
	6 Contributor address; City; State; Zip Code Plano, TX 75074		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired	
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westberg, Trina	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Plano, TX 75074		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westberg, Trina	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Plano, TX 75074		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Maggie	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Murphy, TX 75094		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Maggie	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Murphy, TX 75094		
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: 106/111 Rpt: 109/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Maggie	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Murphy, TX 75094	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Maggie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Murphy, TX 75094	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Maggie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Murphy, TX 75094	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Maggie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Murphy, TX 75094	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Kirby	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 107/111 Rpt: 110/180
2 FILER NAME Collin County Republican Party (CEC)			3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Kirby	6 Contributor address; City; State; Zip Code McKinney, TX 75071	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) Retired		
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Kirby	Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Retired		
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Kirby	Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Retired		
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Kirby	Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Retired		
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Kirby	Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Retired		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 108/111 Rpt: 111/180
2 FILER NAME Collin County Republican Party (CEC)				3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Kirby	7 Amount of Contribution (\$) \$10.00		
	6 Contributor address; City; State; Zip Code McKinney, TX 75071			
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired		
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Kirby	Amount of Contribution (\$) \$10.00		
	Contributor address; City; State; Zip Code McKinney, TX 75071			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired		
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Shelby	Amount of Contribution (\$) \$300.00		
	Contributor address; City; State; Zip Code Plano, TX 75024-6121			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired		
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Shelby	Amount of Contribution (\$) \$100.00		
	Contributor address; City; State; Zip Code Plano, TX 75024-6121			
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired		
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winkel, Amy	Amount of Contribution (\$) \$10.00		
	Contributor address; City; State; Zip Code McKinney, TX 75072			
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/111 Rpt: 112/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winkel, Amy	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code McKinney, TX 75072	
8 Principal occupation / Job title (See Instructions) homemaker		9 Employer (See Instructions) homemaker
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winkel, Amy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code McKinney, TX 75072	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) None
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winkel, Amy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code McKinney, TX 75072	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) None
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winkel, Amy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code McKinney, TX 75072	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) Self
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winkel, Amy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code McKinney, TX 75072	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			<p>1 Total pages Schedule A1: Sch: 110/111 Rpt: 113/180</p>
<p>2 FILER NAME Collin County Republican Party (CEC)</p>			<p>3 Filer ID (Ethics Commission Filers) 00053162</p>
<p>4 Date 07/01/2025</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woppman, Glenn</p>	<p>6 Contributor address; City; State; Zip Code Plano, TX 75093</p>	<p>7 Amount of Contribution (\$) \$25.00</p>
<p>8 Principal occupation / Job title (See Instructions) Software Business Mgr</p>		<p>9 Employer (See Instructions) ASSET InterTech</p>	
<p>Date 08/01/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woppman, Glenn</p>	<p>Contributor address; City; State; Zip Code Plano, TX 75093</p>	<p>Amount of Contribution (\$) \$25.00</p>
<p>Principal occupation / Job title (See Instructions) Software Business Mgr</p>		<p>Employer (See Instructions) ASSET InterTech</p>	
<p>Date 11/21/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wysocki, Ashley</p>	<p>Contributor address; City; State; Zip Code Dallas, TX 75254</p>	<p>Amount of Contribution (\$) \$50.00</p>
<p>Principal occupation / Job title (See Instructions) retired</p>		<p>Employer (See Instructions) retired</p>	
<p>Date 08/27/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yu, Christopher</p>	<p>Contributor address; City; State; Zip Code Fairview, TX 75069</p>	<p>Amount of Contribution (\$) \$10.00</p>
<p>Principal occupation / Job title (See Instructions) data engineer</p>		<p>Employer (See Instructions) ltimindtree</p>	
<p>Date 10/27/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yu, Christopher</p>	<p>Contributor address; City; State; Zip Code Fairview, TX 75069</p>	<p>Amount of Contribution (\$) \$10.00</p>
<p>Principal occupation / Job title (See Instructions) data engineer</p>		<p>Employer (See Instructions) ltimindtree</p>	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A1: Sch: 111/111 Rpt: 114/180</p>
<p>2 FILER NAME Collin County Republican Party (CEC)</p>		<p>3 Filer ID (Ethics Commission Filers) 00053162</p>
<p>4 Date 09/27/2025</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yu, Christopher 6 Contributor address; City; State; Zip Code Fairview, TX 75069</p>	<p>7 Amount of Contribution (\$) \$10.00</p>
<p>8 Principal occupation / Job title (See Instructions) data engineer</p>		<p>9 Employer (See Instructions) ltimindtree</p>
<p>Date 11/27/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yu, Christopher Contributor address; City; State; Zip Code Fairview, TX 75069</p>	<p>Amount of Contribution (\$) \$10.00</p>
<p>Principal occupation / Job title (See Instructions) data engineer</p>		<p>Employer (See Instructions) ltimindtree</p>
<p>Date 12/27/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yu, Christopher Contributor address; City; State; Zip Code Fairview, TX 75069</p>	<p>Amount of Contribution (\$) \$10.00</p>
<p>Principal occupation / Job title (See Instructions) data engineer</p>		<p>Employer (See Instructions) ltimindtree</p>

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.			
2 FILER NAME Collin County Republican Party (CEC)			
4 TOTAL OF UNITEMIZED PLEDGES \$ 0.00			
5 Date	6 Full name of pledgor	<input type="checkbox"/> out-of-state PAC (ID#: _____)	8 Amount of pledge (\$)
	7 Pledgor Address;		9 In-kind description (If applicable)
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 116/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 1/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/26/2025	5 Payee name 4Imprint	
6 Amount (\$) \$676.07	7 Payee address; City; State; Zip Code 101 Commerce Street Oshkosh, WI 54901	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event (Labor Day) expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name Advocacy Lab	
Amount (\$) \$53.72	Payee address; City; State; Zip Code 762 Riverside Dr. 3c New Yoork, NY 10031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name Advocacy Lab	
Amount (\$) \$53.72	Payee address; City; State; Zip Code 762 Riverside Dr. 3c New York, NY 10031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 2/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/26/2025	5 Payee name Advocacy Lab	
6 Amount (\$) \$53.72	7 Payee address; City; 762 Riverside Dr. 3c New Yoork, NY 10031	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name Amazon	
Amount (\$) \$106.68	Payee address; City; 410 Terry Ave. North Seattle, WA 98109	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Amazon	
Amount (\$) \$12.82	Payee address; City; 410 Terry Ave. North Seattle, WA 98109	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 3/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/26/2025	5 Payee name Amazon	
6 Amount (\$) \$145.08	7 Payee address; City; 410 Terry Ave. North Seattle, WA 98109	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name Amazon	
Amount (\$) \$789.61	Payee address; City; 410 Terry Ave. North Seattle, WA 98109	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor Day Event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name Amazon	
Amount (\$) \$533.88	Payee address; City; 410 Terry Ave. North Seattle, WA 98109	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 4/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/18/2025	5 Payee name Amazon	
6 Amount (\$) \$12.82	7 Payee address; City; State; Zip Code 410 Terry Ave. North Seattle, WA 98109	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/26/2025	Payee name Amazon	
Amount (\$) \$35.72	Payee address; City; State; Zip Code 410 Terry Ave. North Seattle, WA 98109	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name American Button Machines	
Amount (\$) \$106.93	Payee address; City; State; Zip Code 1845 Summit Ave. #408 Plano, TX 75074	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 5/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/16/2025	5 Payee name Anedot	
6 Amount (\$) \$64.10	7 Payee address; City; State; Zip Code PO Box 84314 Baton Rouge, LA 70884	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/15/2025	Payee name Anedot	
Amount (\$) \$606.78	Payee address; City; State; Zip Code PO Box 84314 Baton Rouge, LA 70884	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/15/2025	Payee name Anedot	
Amount (\$) \$339.70	Payee address; City; State; Zip Code PO Box 84314 Baton Rouge, LA 70884	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 6/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/15/2025	5 Payee name Anedot	
6 Amount (\$) \$68.80	7 Payee address; City; State; Zip Code PO Box 84314 Baton Rouge, LA 70884	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/14/2025	Payee name Anedot	
Amount (\$) \$95.80	Payee address; City; State; Zip Code PO Box 84314 Baton Rouge, LA 70884	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/15/2025	Payee name Anedot	
Amount (\$) \$117.80	Payee address; City; State; Zip Code PO Box 84314 Baton Rouge, LA 70884	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 7/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/29/2025	5 Payee name Anna Chamber of Commerce	
6 Amount (\$) \$118.50	7 Payee address; City; 501 Shirley Street Anna, TX 75409	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Argenta Brands	Office sought Office held
Date 10/28/2025	Payee name Argenta Brands	
Amount (\$) \$395.00	Payee address; City; 5870 Wind Cave Lane Jacksonville, FL 32258	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Argenta Brands	Office sought Office held
Date 11/18/2025	Payee name Argenta Brands	
Amount (\$) \$395.00	Payee address; City; 5870 Wind Cave Lane Jacksonville, FL 32258	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Argenta Brands	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 8/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/26/2025	5 Payee name Argenta Brands	
6 Amount (\$) \$395.00	7 Payee address; City; 5870 Wind Cave Lane Jacksonville, FL 32258	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name Armstrong, Kimberly	
Amount (\$) \$27.65	Payee address; City; 2711 Bissell Way Wylie, TX 75098	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimburse for event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Atmos Energy	
Amount (\$) \$149.86	Payee address; City; 5430 LBJ Freeway Dallas, TX 75240	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas utility
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 9/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/28/2025	5 Payee name Atmos Energy	
6 Amount (\$) \$74.65	7 Payee address; City; State; Zip Code 5430 LBJ Freeway Dallas, TX 75240	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas utility
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name Atmos Energy	
Amount (\$) \$160.13	Payee address; City; State; Zip Code 5430 LBJ Freeway Dallas, TX 75240	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas utility
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/24/2025	Payee name Blanco River Meat Company	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 200 Rolling Oaks Dr. Driftwood, TX 78619	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Kerr County Disaster Fund
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 10/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/16/2025	5 Payee name Blue Ribbons Trophies	
6 Amount (\$) \$171.04	7 Payee address; City; 2915 W 15th Street Plano, TX 75075	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense name tag
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/26/2025	Payee name Blue Ribbons Trophies	
Amount (\$) \$171.04	Payee address; City; 2915 W 15th Street Plano, TX 75075	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense badges
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 10/28/2025	Payee name Blue Ribbons Trophies	
Amount (\$) \$8.56	Payee address; City; 2915 W 15th Street Plano, TX 75075	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense badge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 11/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/18/2025	5 Payee name Blue Ribbons Trophies	
6 Amount (\$) \$68.42	7 Payee address; City; 2915 W 15th Street Plano, TX 75075	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense badge
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/26/2025	Payee name Blue Ribbons Trophies	
Amount (\$) \$59.87	Payee address; City; 2915 W 15th Street Plano, TX 75075	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense badges
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name Blue Ridge Riding Club	
Amount (\$) \$158.00	Payee address; City; Co Rd. 504 Blue Ridge, TX 75424	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 12/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/29/2025	5 Payee name CNA Insurance	
6 Amount (\$) \$976.25	7 Payee address; City; State; Zip Code 2400 N. Glenville Richardson, TX 75082	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense insurance
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name CNA Insurance	
Amount (\$) \$218.83	Payee address; City; State; Zip Code 2400 N. Glenville Richardson, TX 75082	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense insurance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name Canva	
Amount (\$) \$31.60	Payee address; City; State; Zip Code 200 E 6th St. Ste 200 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 13/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/18/2025	5 Payee name Canva	
6 Amount (\$) \$347.60	7 Payee address; City; State; Zip Code 200 E 6th St. Ste 200 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing materials
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/26/2025	Payee name Canva	
Amount (\$) \$31.60	Payee address; City; State; Zip Code 200 E 6th St. Ste 200 Austin, TX 78701	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name City of Murphy	
Amount (\$) \$402.90	Payee address; City; State; Zip Code 206 N Murphy Road Murphy, TX 75094	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event ex[pen]se
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 14/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/16/2025	5 Payee name Collin College	
6 Amount (\$) \$2,409.66	7 Payee address; City; State; Zip Code 4800 Preston Park Boulevard Plano, TX 75093	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense offsite meeting venue
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name DFW Direct Marketing	
Amount (\$) \$790.00	Payee address; City; State; Zip Code 931 Custer Rd. Richardson, TX 75080	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertising assistance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name DFW Party Rental	
Amount (\$) \$28.34	Payee address; City; State; Zip Code 2630 Northaven Rd Dallas, TX 75229	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 15/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/28/2025	5 Payee name DFW Party Rental	
6 Amount (\$) \$255.07	7 Payee address; City; 2630 Northaven Rd Dallas, TX 75229	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event expense for Labor Day
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name Davidson, Jimmie	
Amount (\$) \$1,185.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Allen, TX 75013	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event expense for Labor Day event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name Devscape Software, Inc.	
Amount (\$) \$395.00	Payee address; City; State; Zip Code 5870 Wind Cave Lane Jacksonville, FL 32258	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 16/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/29/2025	5 Payee name Devscape Software, Inc.	
6 Amount (\$) \$395.00	7 Payee address; City; 5870 Wind Cave Lane Jacksonville, FL 32258	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Devscape Software, Inc.	Office sought Office held
Date 09/26/2025	Payee name Devscape Software, Inc.	
Amount (\$) \$395.00	Payee address; City; 5870 Wind Cave Lane Jacksonville, FL 32258	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dollar General	Office sought Office held
Date 08/29/2025	Payee name Dollar General	
Amount (\$) \$11.11	Payee address; City; 2761 W 15th St. Plano, TX 75075	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dollar General	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 17/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/26/2025	5 Payee name Dollar Tree	
6 Amount (\$) \$25.66	7 Payee address; City; State; Zip Code 2743 W15th St. Plano, TX 75075	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Domino's	
Amount (\$) \$112.12	Payee address; City; State; Zip Code 1301 Custer Rd. Plano, TX 75075	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense pizza
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Executive Press Inc	
Amount (\$) \$2,048.56	Payee address; City; State; Zip Code 1400 Presidential Suite 110 Richardson, TX 75080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 18/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162	
4 Date 09/26/2025	5 Payee name Executive Press Inc		
6 Amount (\$) \$155.47	7 Payee address; City; 1400 Presidential Suite 110 Richardson, TX 75080	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/18/2025	Payee name Executive Press Inc		
Amount (\$) \$222.35	Payee address; City; 1400 Presidential Suite 110 Richardson, TX 75080	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/16/2025	Payee name Extra Space		
Amount (\$) \$161.95	Payee address; City; 6501 W Plano Expwy Plano, TX 75093	State; Zip Code	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense offsite storage	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 19/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/29/2025	5 Payee name Extra Space	
6 Amount (\$) \$55.99	7 Payee address; City; 6501 W Plano Expwy Plano, TX 75093	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense offsite storage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Extra Space	
Amount (\$) \$287.26	Payee address; City; 6501 W Plano Expwy Plano, TX 75093	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name Extra Space	
Amount (\$) \$218.04	Payee address; City; 6501 W Plano Expwy Plano, TX 75093	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense offsite storage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 20/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/28/2025	5 Payee name Extra Space	
6 Amount (\$) \$218.04	7 Payee address; City; 6501 W Plano Expwy Plano, TX 75093	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense offsite storage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name Extra Space	
Amount (\$) \$218.04	Payee address; City; 6501 W Plano Expwy Plano, TX 75093	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense offsite storage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/26/2025	Payee name Extra Space	
Amount (\$) \$264.65	Payee address; City; 6501 W Plano Expwy Plano, TX 75093	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense offsite storage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 21/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/25/2025	5 Payee name Front Line Hero's Outdoors	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 13536 Summit San Antonio, TX 78245	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Kerrville Disaster recovery fund
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name Frontier Communications	
Amount (\$) \$55.11	Payee address; City; State; Zip Code PO Box 740407 Cincinnati, OH 45274-0407	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense internet service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Frontier Communications	
Amount (\$) \$411.76	Payee address; City; State; Zip Code PO Box 740407 Cincinnati, OH 45274-0407	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense internet service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 22/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/26/2025	5 Payee name Frontier Communications	
6 Amount (\$) \$55.99	7 Payee address; City; State; Zip Code PO Box 740407 Cincinnati, OH 45274-0407	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense internet service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name Frontier Communications	
Amount (\$) \$55.99	Payee address; City; State; Zip Code PO Box 740407 Cincinnati, OH 45274-0407	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense internet service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name Frontier Communications	
Amount (\$) \$55.99	Payee address; City; State; Zip Code PO Box 740407 Cincinnati, OH 45274-0407	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense internet service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 23/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/26/2025	5 Payee name Frontier Communications	
6 Amount (\$) \$55.99	7 Payee address; City; State; Zip Code PO Box 740407 Cincinnati, OH 45274-0407	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense internet service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name Greater Celina Chamber od Commerce	
Amount (\$) \$79.00	Payee address; City; State; Zip Code 110 S Preston Rd. Celina, TX 75009	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Harland Clarke	
Amount (\$) \$27.78	Payee address; City; State; Zip Code 15955 LaCantera Pkwy San Antonio, TX 78256	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense banking service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 24/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/08/2025	5 Payee name Harland Clarke	
6 Amount (\$) \$110.54	7 Payee address; City; 15955 LaCantera Pkwy San Antonio, TX 78256	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charge for deposit stamps
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name Harland Clarke	
Amount (\$) \$87.33	Payee address; City; 15955 LaCantera Pkwy San Antonio, TX 78256	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fee for supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Henry, Byron	
Amount (\$) \$4,692.69	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Prosper, TX 75078	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimburse for political event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 25/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/26/2025	5 Payee name Henry, Byron	
6 Amount (\$) \$1,975.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Prosper, TX 75078	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for LDD event expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name Henry, Byron	
Amount (\$) \$280.45	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Prosper, TX 75078	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) merchandise	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimburse for merchandise supplies for Charlie Kirk
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name Henry, Byron	
Amount (\$) \$395.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Prosper, TX 75078	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimburse for Labor Day event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 26/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/23/2025	5 Payee name Henry, Byron	
6 Amount (\$) \$520.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Prosper, TX 75078	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimburse for XMAS party event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Hobby Lobby	
Amount (\$) \$68.62	Payee address; City; State; Zip Code 5238 Preston Rd. Plano, TX 75034	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name ICD Soft	
Amount (\$) \$59.79	Payee address; City; State; Zip Code www.icdsoft.com Boston, MA 02101	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 27/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/16/2025	5 Payee name IRS Payroll Tax	
6 Amount (\$) \$1,382.30	7 Payee address; City; State; Zip Code PO Box 409101 Ogden , UT 84409	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense P/R Taxes
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name IRS Payroll Tax	
Amount (\$) \$1,396.50	Payee address; City; State; Zip Code PO Box 409101 Ogden , UT 84409	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense P/R Tax
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name IRS Payroll Tax	
Amount (\$) \$1,382.31	Payee address; City; State; Zip Code PO Box 409101 Ogden , UT 84409	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense P/R Tax
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 28/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/18/2025	5 Payee name IRS Payroll Tax	
6 Amount (\$) \$2,764.62	7 Payee address; City; State; Zip Code PO Box 409101 Ogden , UT 84409	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense P/R Taxes
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/26/2025	Payee name IRS Payroll Tax	
Amount (\$) \$1,382.29	Payee address; City; State; Zip Code PO Box 409101 Ogden , UT 84409	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense P/R Tax
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name India Association of North Texas	
Amount (\$) \$474.00	Payee address; City; State; Zip Code 701 N. Central Expy Richardson, TX 75080	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 29/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/28/2025	5 Payee name Ink Technologies	
6 Amount (\$) \$249.71	7 Payee address; City; 7300 McEwen Road Dayton, OH 45459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ink supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name James Farley	
Amount (\$) \$53.72	Payee address; City; 1206 Laskin Rd Ste 201-o Virginia Beach, VA 23451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense materials for printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name Jones, Jacquez	
Amount (\$) \$404.88	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Little Elm, TX 75068	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 30/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162	
4 Date 12/26/2025	5 Payee name La Madeline		
6 Amount (\$) \$301.70	7 Payee address; City; State; Zip Code 5000 W Park Blvd. Suite 100 Plano, TX 75093		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense restaurant	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 11/18/2025	Payee name Lopez, Marco		
Amount (\$) \$404.87	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Wylie, TX 75098		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 12/26/2025	Payee name Lord of Life Lutheran Church		
Amount (\$) \$197.50	Payee address; City; State; Zip Code 3601 W 15th St. Plano, TX 75075		
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense offsite event venue	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 31/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/16/2025	5 Payee name Mail Chimp	
6 Amount (\$) \$111.16	7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name MailChimp	
Amount (\$) \$111.16	Payee address; City; State; Zip Code 675 Ponce de Leon NE Suite 5000 Atlanta, GA 30308	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name MailChimp	
Amount (\$) \$111.16	Payee address; City; State; Zip Code 675 Ponce de Leon NE Suite 5000 Atlanta, GA 30308	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 32/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/28/2025	5 Payee name MailChimp	
6 Amount (\$) \$111.16	7 Payee address; City; State; Zip Code 675 Ponce de Leon NE Suite 5000 Atlanta, GA 30308	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Payee name MailChimp	Office sought Office held
Date 11/18/2025	Payee address; City; State; Zip Code 675 Ponce de Leon NE Suite 5000 Atlanta, GA 30308	
Amount (\$) \$111.16		
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Payee name MailChimp	Office sought Office held
Date 12/26/2025	Payee address; City; State; Zip Code 675 Ponce de Leon NE Suite 5000 Atlanta, GA 30308	
Amount (\$) \$111.16		
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Payee name MailChimp	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 33/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/18/2025	5 Payee name McAfee	
6 Amount (\$) \$42.75	7 Payee address; City; State; Zip Code 6220 America Center Drive San Jose, CA 95002	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought
Date 12/26/2025	Payee name Michael's Keys	Office held Office held
Amount (\$) \$121.87	Payee address; City; State; Zip Code 1313 Karla Dr. Hurst, TX 76053	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Key maintenance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought
Date 07/16/2025	Payee name Microsoft	Office held Office held
Amount (\$) \$88.29	Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052-6399	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software/service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 34/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/29/2025	5 Payee name Microsoft	
6 Amount (\$) \$96.97	7 Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052-6399	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name Microsoft	
Amount (\$) \$101.52	Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052-6399	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name Microsoft	
Amount (\$) \$91.25	Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052-6399	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 35/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/18/2025	5 Payee name Microsoft	
6 Amount (\$) \$217.23	7 Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052-6399	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/26/2025	Payee name Microsoft	
Amount (\$) \$111.13	Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052-6399	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/20/2025	Payee name Minnie's Food Pantry	
Amount (\$) \$127.00	Payee address; City; State; Zip Code 661 18th St. Plano, TX 75074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 36/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/29/2025	5 Payee name Minuteman Press	
6 Amount (\$) \$340.21	7 Payee address; City; State; Zip Code 1502 W. University Dr. McKinney, TX 75069	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copy expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name Mrs. Clean	
Amount (\$) \$151.68	Payee address; City; State; Zip Code 125 Fountain Court McKinney, TX 75069	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense janitorial expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Mrs. Clean	
Amount (\$) \$151.68	Payee address; City; State; Zip Code 125 Fountain Court McKinney, TX 75069	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense janitorial expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 37/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/26/2025	5 Payee name Mrs. Clean	
6 Amount (\$) \$75.84	7 Payee address; City; State; Zip Code 125 Fountain Court McKinney, TX 75069	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense janitorial expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Mrs. Clean	Office sought Office held
Date 10/28/2025	Payee name Mrs. Clean	
Amount (\$) \$75.84	Payee address; City; State; Zip Code 125 Fountain Court McKinney, TX 75069	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense janitorial expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Mrs. Clean	Office sought Office held
Date 11/18/2025	Payee name Mrs. Clean	
Amount (\$) \$75.84	Payee address; City; State; Zip Code 125 Fountain Court McKinney, TX 75069	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense janitorial expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Mrs. Clean	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 38/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/26/2025	5 Payee name Mrs. Clean	
6 Amount (\$) \$75.84	7 Payee address; City; State; Zip Code 125 Fountain Court McKinney, TX 75069	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense janitorial service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/26/2025	Payee name Myers PE Center	
Amount (\$) \$727.35	Payee address; City; State; Zip Code 7117 CR 166 McKinney, TX 75071	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/26/2025	Payee name NameCheap.com	
Amount (\$) \$14.76	Payee address; City; State; Zip Code 26431 Crown Valley Pkwy #260 Mission Viejo, CA 92691	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 39/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/18/2025	5 Payee name Napoli's	
6 Amount (\$) \$222.53	7 Payee address; City; State; Zip Code 2865 McDermott Rd. #235 Plano, TX 75025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense restaurant expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name National Custom Insignia	
Amount (\$) \$357.87	Payee address; City; State; Zip Code 3094 Forsythia Drive Odessa , FL 33556	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name OTC Brands	
Amount (\$) \$252.47	Payee address; City; State; Zip Code PO Box 2308 Omaha, NE 68103	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 40/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/29/2025	5 Payee name Office Corp	
6 Amount (\$) \$16.86	7 Payee address; City; 1935 W. State Street Suite 107 Garland , TX 75042	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copy expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/26/2025	Payee name Office Corp	Office held
Amount (\$) \$13.62	Payee address; City; 1935 W. State Street Suite 107 Garland , TX 75042	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copy expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 10/28/2025	Payee name Office Corp	Office held
Amount (\$) \$23.73	Payee address; City; 1935 W. State Street Suite 107 Garland , TX 75042	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copy expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 41/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/18/2025	5 Payee name Office Corp	
6 Amount (\$) \$11.08	7 Payee address; City; 1935 W. State Street Suite 107 Garland , TX 75042	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copy expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/26/2025	Payee name Office Corp	Office held
Amount (\$) \$52.90	Payee address; City; 1935 W. State Street Suite 107 Garland , TX 75042	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copy expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 10/28/2025	Payee name Office Depot	Office held
Amount (\$) \$10.14	Payee address; City; 1751 N Central Expy. McKinney, TX 75070	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 42/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/26/2025	5 Payee name Office Depot	
6 Amount (\$) \$185.16	7 Payee address; City; State; Zip Code 1751 N Central Expy. McKinney, TX 75070	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name Pierce & Son Air Conditioning	
Amount (\$) \$616.58	Payee address; City; State; Zip Code 10909 Sanden Dr. Dallas, TX 75238	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense repair air conditioning
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name Pierce & Son Air Conditioning	
Amount (\$) \$470.35	Payee address; City; State; Zip Code 10909 Sanden Dr. Dallas, TX 75238	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense AC repair
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 43/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/18/2025	5 Payee name RaceTrac	
6 Amount (\$) \$16.37	7 Payee address; City; 620 Coit Rd. Plano, TX 75075	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gasoline
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/26/2025	Payee name Rudy's Country Store	
Amount (\$) \$3,741.39	Payee address; City; 1790 N. Central Expy. Allen, TX 75002	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense XMAS event venue
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Sam's Club	
Amount (\$) \$38.99	Payee address; City; 1200 E. Spring Creek Pkwy Plano, TX 75074	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 44/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/28/2025	5 Payee name Sam's Club	
6 Amount (\$) \$68.34	7 Payee address; City; State; Zip Code 1200 E. Spring Creek Pkwy Plano, TX 75074	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name Scott, Dave	
Amount (\$) \$63.81	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Allen, TX 75013	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimburse for offsite storage cost
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name Scott, Dave	
Amount (\$) \$61.47	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Allen, TX 75013	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement for event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 45/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/29/2025	5 Payee name Southfork	
6 Amount (\$) \$16,400.49	7 Payee address; City; State; Zip Code 3700 Hogge Rd Parker, TX 75002	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense venue
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name Southfork	
Amount (\$) \$1,814.87	Payee address; City; State; Zip Code 3700 Hogge Rd Parker, TX 75002	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Venue for Labor Day event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name Southfork	
Amount (\$) \$1,490.22	Payee address; City; State; Zip Code 3700 Hogge Rd Parker, TX 75002	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Venue for Labor Day event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 46/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/28/2025	5 Payee name SpeedPro Imaging	
6 Amount (\$) \$629.78	7 Payee address; City; 1200 Commerce Dr. Ste 107 Plano, TX 75093	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event expense for Labor Day event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name Square	
Amount (\$) \$1.26	Payee address; City; 1455 Market St. Suite 60 San Francisco, CA 94103	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Square	
Amount (\$) \$2.53	Payee address; City; 1455 Market St. Suite 60 San Francisco, CA 94103	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 47/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/15/2025	5 Payee name Square	
6 Amount (\$) \$2.23	7 Payee address; City; State; Zip Code 1455 Market St. Suite 60 San Francisco, CA 94103	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name Square	
Amount (\$) \$30.26	Payee address; City; State; Zip Code 1455 Market St. Suite 60 San Francisco, CA 94103	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name Square	
Amount (\$) \$9.58	Payee address; City; State; Zip Code 1455 Market St. Suite 60 San Francisco, CA 94103	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 48/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/26/2025	5 Payee name Square	
6 Amount (\$) \$5.18	7 Payee address; City; State; Zip Code 1455 Market St. Suite 60 San Francisco, CA 94103	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name Staples Office Supply Frisco	
Amount (\$) \$105.08	Payee address; City; State; Zip Code 3333 Preston Road Frisco, TX 75034	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/15/2025	Payee name Stripe	
Amount (\$) \$35.13	Payee address; City; State; Zip Code 354 Oyster Point Blvd. South San Francisco, CA 94080	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 49/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 08/15/2025	5 Payee name Stripe	
6 Amount (\$) \$27.04	7 Payee address; City; State; Zip Code 354 Oyster Point Blvd. South San Francisco, CA 94080	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/15/2025	Payee name Stripe	
Amount (\$) \$77.34	Payee address; City; State; Zip Code 354 Oyster Point Blvd. South San Francisco, CA 94080	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name Stripe	
Amount (\$) \$38.53	Payee address; City; State; Zip Code 354 Oyster Point Blvd. South San Francisco, CA 94080	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 50/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/14/2025	5 Payee name Stripe	
6 Amount (\$) \$33.17	7 Payee address; City; State; Zip Code 354 Oyster Point Blvd. South San Francisco, CA 94080	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/15/2025	Payee name Stripe	
Amount (\$) \$33.39	Payee address; City; State; Zip Code 354 Oyster Point Blvd. South San Francisco, CA 94080	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name TXU Energy	
Amount (\$) \$307.38	Payee address; City; State; Zip Code P. O. Box 650638 Dallas, TX 75265-0638	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense electric utility
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 51/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/26/2025	5 Payee name TXU Energy	
6 Amount (\$) \$433.90	7 Payee address; City; State; Zip Code P. O. Box 650638 Dallas, TX 75265-0638	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense electric utility
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name TXU Energy	
Amount (\$) \$568.45	Payee address; City; State; Zip Code P. O. Box 650638 Dallas, TX 75265-0638	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense electric utility
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name TXU Energy	
Amount (\$) \$547.76	Payee address; City; State; Zip Code P. O. Box 650638 Dallas, TX 75265-0638	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense electric utility
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 52/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/26/2025	5 Payee name TXU Energy	
6 Amount (\$) \$371.22	7 Payee address; City; State; Zip Code P. O. Box 650638 Dallas, TX 75265-0638	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense electric utility
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Temu	
Amount (\$) \$152.68	Payee address; City; State; Zip Code 31 Saint James Ave. Ste 355 Boston, MA 02116	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name Temu	
Amount (\$) \$27.45	Payee address; City; State; Zip Code 31 Saint James Ave. Ste 355 Boston, MA 02116	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 53/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 10/28/2025	5 Payee name Temu	
6 Amount (\$) \$173.80	7 Payee address; City; State; Zip Code 31 Saint James Ave. Ste 355 Boston, MA 02116	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/26/2025	Payee name Temu	
Amount (\$) \$177.39	Payee address; City; State; Zip Code 31 Saint James Ave. Ste 355 Boston, MA 02116	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Texas Workforce Commission	
Amount (\$) \$46.22	Payee address; City; State; Zip Code P. O. Box 149037 Austin, TX 78714	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense P/R Tax
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 54/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 11/18/2025	5 Payee name The Mail Room	
6 Amount (\$) \$213.80	7 Payee address; City; State; Zip Code 2701 W 15th Street Plano, TX 75075	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PO Box
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name Tockify Web Calendar	
Amount (\$) \$6.38	Payee address; City; State; Zip Code 325-327 Old Shoreham Road W8a Knoll Business Centre Hove 01234 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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Tockify Web Calendar	
Amount (\$) \$6.37	Payee address; City; State; Zip Code 325-327 Old Shoreham Road W8a Knoll Business Centre Hove 01234 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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 55/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/26/2025	5 Payee name Tockify Web Calendar	
6 Amount (\$) \$6.37	7 Payee address; City; State; Zip Code 325-327 Old Shoreham Road W8a Knoll Business Centre Hove 01234 United Kingdom	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name Tockify Web Calendar	
Amount (\$) \$6.38	Payee address; City; State; Zip Code 325-327 Old Shoreham Road W8a Knoll Business Centre Hove 01234 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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name Tockify Web Calendar	
Amount (\$) \$6.38	Payee address; City; State; Zip Code 325-327 Old Shoreham Road W8a Knoll Business Centre Hove 01234 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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 56/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/26/2025	5 Payee name Tockify Web Calendar	
6 Amount (\$) \$6.38	7 Payee address; City; State; Zip Code 325-327 Old Shoreham Road W8a Knoll Business Centre Hove 01234 United Kingdom	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name Tom Thumb	
Amount (\$) \$30.89	Payee address; City; State; Zip Code 5968 Parker Rd. Plano, TX 75093	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name Tom Thumb	
Amount (\$) \$27.33	Payee address; City; State; Zip Code 5968 Parker Rd. Plano, TX 75093	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 57/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/16/2025	5 Payee name USPS	
6 Amount (\$) \$4.41	7 Payee address; City; State; Zip Code 4745 Star Ridge Ln Frisco, TX 75034	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name Vista Print USA	
Amount (\$) \$31.46	Payee address; City; State; Zip Code 275 Wyman Street Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copy service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Wade, Terry	
Amount (\$) \$3,224.23	Payee address; City; State; Zip Code 3505 Michael Dr Plano, TX 75023	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 58/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 09/26/2025	5 Payee name Wade, Terry	
6 Amount (\$) \$3,224.23	7 Payee address; City; State; Zip Code 3505 Michael Dr Plano, TX 75023	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wade, Terry	Office sought Office held
Date 10/28/2025	Payee name Wade, Terry	
Amount (\$) \$3,224.23	Payee address; City; State; Zip Code 3505 Michael Dr Plano, TX 75023	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wade, Terry	Office sought Office held
Date 11/18/2025	Payee name Wade, Terry	
Amount (\$) \$3,224.22	Payee address; City; State; Zip Code 3505 Michael Dr Plano, TX 75023	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wade, Terry	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 59/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162	
4 Date 07/16/2025	5 Payee name Walmart Supercenter		
6 Amount (\$) \$76.66	7 Payee address; City; 8801 Ohio Dr. Plano, TX 75024	State; Zip Code	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/26/2025	Payee name Walmart Supercenter		
Amount (\$) \$436.58	Payee address; City; 8801 Ohio Dr. Plano, TX 75024	State; Zip Code	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor Day event expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/28/2025	Payee name Walmart Supercenter		
Amount (\$) \$38.32	Payee address; City; 8801 Ohio Dr. Plano, TX 75024	State; Zip Code	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 60/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/26/2025	5 Payee name Walmart Supercenter	
6 Amount (\$) \$27.98	7 Payee address; City; 8801 Ohio Dr. Plano, TX 75024	State; Zip Code
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Wylie Chamber of Commerce	
Amount (\$) \$59.25	Payee address; City; 307 N. Ballard Ave Wylie, TX 75098	State; Zip Code
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Wylie Chamber of Commerce	
Amount (\$) \$240.95	Payee address; City; 307 N. Ballard Ave Wylie, TX 75098	State; Zip Code
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 61/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162
4 Date 07/16/2025	5 Payee name Zoom Video Communications	
6 Amount (\$) \$26.94	7 Payee address; City; 55 Almaden Blvd. 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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense video services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Zoom Video Communications	
Amount (\$) \$57.23	Payee address; City; 55 Almaden Blvd. San Jose, CA 95113	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense video services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/28/2025	Payee name Zoom Video Communications	
Amount (\$) \$28.61	Payee address; City; 55 Almaden Blvd. San Jose, CA 95113	
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense internet conference service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 62/62 Rpt:	2 FILER NAME Collin County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00053162	
4 Date 11/18/2025	5 Payee name Zoom Video Communications		
6 Amount (\$) \$57.23	7 Payee address; City; 55 Almaden Blvd. 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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense video conference service	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

**INTEREST, CREDITS, GAINS, REFUNDS, AND
CONTRIBUTIONS RETURNED TO FILER**

SCHEDULE K

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule K: Sch: 1/2 Rpt: 179/180</p>
<p>2 FILER NAME Collin County Republican Party (CEC)</p>		<p>3 Filer ID (Ethics Commission Filers) 00053162</p>
<p>4 Date 07/31/2025</p>	<p>5 Name of person from whom amount is received Texas Republic Bank</p>	<p>8 Amount (\$) \$16.83</p>
	<p>6 Address of person from whom amount is received; City; State; Zip Code Frisco, TX 75034</p>	
	<p>7 Purpose for which amount is received excess funds</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 08/29/2025</p>	<p>Name of person from whom amount is received Texas Republic Bank</p>	<p>Amount (\$) \$15.53</p>
	<p>Address of person from whom amount is received; City; State; Zip Code Frisco, TX 75034</p>	
	<p>Purpose for which amount is received Excess Funds</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 10/31/2025</p>	<p>Name of person from whom amount is received Texas Republic Bank</p>	<p>Amount (\$) \$10.32</p>
	<p>Address of person from whom amount is received; City; State; Zip Code Frisco, TX 75034</p>	
	<p>Purpose for which amount is received Excess Funds</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 10/31/2025</p>	<p>Name of person from whom amount is received Texas Republic Bank</p>	<p>Amount (\$) \$10.00</p>
	<p>Address of person from whom amount is received; City; State; Zip Code Frisco, TX 75034</p>	
	<p>Purpose for which amount is received excess funds invested</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 11/30/2025</p>	<p>Name of person from whom amount is received Texas Republic Bank</p>	<p>Amount (\$) \$9.04</p>
	<p>Address of person from whom amount is received; City; State; Zip Code Frisco, TX 75034</p>	
	<p>Purpose for which amount is received Excess funds invested</p>	<input type="checkbox"/> Check if political contribution returned to filer

**INTEREST, CREDITS, GAINS, REFUNDS, AND
CONTRIBUTIONS RETURNED TO FILER****SCHEDULE K**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 2/2 Rpt: 180/180
2 FILER NAME Collin County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00053162
4 Date 12/31/2025	5 Name of person from whom amount is received Texas Republic Bank	8 Amount (\$) \$10.65
	6 Address of person from whom amount is received; City; State; Zip Code Frisco, TX 75034	<input type="checkbox"/> Check if political contribution returned to filer
7 Purpose for which amount is received excess funds invested		