

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) 00035364	2 Total pages filed: 42
3 COMMITTEE NAME Grayson County Republican Party (CEC)			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 02/02/2026 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 3122 Sherman, TX 75091		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Shawn D. NICKNAME LAST SUFFIX Nesmith		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 701 Mohawk Drive Tioga, TX 76271		
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 701 Mohawk Drive Tioga, TX 76271		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (972) 251-3058		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 Day Year 01/01/2026 THROUGH 01/22/2026		
11 ELECTION	ELECTION DATE Month Day Year 03/03/2026	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC
COVER SHEET PG 2

12 COMMITTEE NAME Grayson County Republican Party (CEC)		13 Filer ID (Ethics Commission Filers) 00035364
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 Republican
		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. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 48,371.94
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 12,134.71
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 121,350.85
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.

Shawn D. Nesmith

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 42

17 COMMITTEE NAME Grayson County Republican Party (CEC)		18 Filer ID (Ethics Commission Filers) 00035364
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 48,371.94
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 12,134.71
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
10.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/22 Rpt: 4/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, ROB <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75092	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) ASSA ABLOY
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, RON <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) ASSA ABLOY
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, STACY <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$375.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) SELF
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, THERON <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) MARKETER		Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARTHUR, ART <hr/> Contributor address; City; State; Zip Code DENISON, TX 75021	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) GRAYSON COUNTY COMMISSIONER PCT 2		Employer (See Instructions) GRAYSON COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/22 Rpt: 5/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHMORE, KELLY 6 Contributor address; City; State; Zip Code SHERMAN, TX 75092	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) DISTRICT CLERK		9 Employer (See Instructions) GRAYSON COUNTY
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, STEVE Contributor address; City; State; Zip Code MCKINNEY, TX 75072	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) SFS, LLC
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, BRITTON Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) BRITTON BROOKS
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, BRITTON Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, EVELYN Contributor address; City; State; Zip Code FRISCO, TX 75036	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) EDUCATOR/STATE BOARD OF EDUCATION, DISTRICT 14		Employer (See Instructions) NONE PROVIDED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/22 Rpt: 6/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLER, RON <hr/> 6 Contributor address; City; State; Zip Code DENISON, TX 75021	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, STEVE <hr/> Contributor address; City; State; Zip Code VAN ALSTYNE, TX 75495	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, LEONORA <hr/> Contributor address; City; State; Zip Code POTTSBORO, TX 75076	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) BETTERHOMES&GARDENS
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, LEONORA <hr/> Contributor address; City; State; Zip Code POTTSBORO, TX 75076	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) BETTERHOMES&GARDENS
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYTON, ART <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$900.00
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: 4/22 Rpt: 7/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONWAY, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code CROSS ROADS, TX 76227	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRABTREE, MARY <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) RETAIL		Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWLEY, ROBERT <hr/> Contributor address; City; State; Zip Code DENISON, TX 75021	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) BANKING		Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTIS, MARIE <hr/> Contributor address; City; State; Zip Code HOWE, TX 75459	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) PROPERTY MANAGER		Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAWSEY, BRUCE <hr/> Contributor address; City; State; Zip Code VAN ALSTYNE, TX 75495	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) COUNTY JUDGE		Employer (See Instructions) GRAYSON COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/22 Rpt: 8/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENMAN, LINDA <hr/> 6 Contributor address; City; State; Zip Code DENISON, TX 75021	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE ADMINISTRATOR		9 Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN JR, JAMES <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) COUNTY COURT AT LAW #2 JUDGE		Employer (See Instructions) GRAYSON COUNTY
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EUDY, RANDALL <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$52.05
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITCH, KENT <hr/> Contributor address; City; State; Zip Code POTTSBORO, TX 75076	Amount of Contribution (\$) \$0.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) NONE PROVIDED
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITCH, KENT <hr/> Contributor address; City; State; Zip Code POTTSBORO, TX 75076	Amount of Contribution (\$) \$1,200.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) NONE PROVIDED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/22 Rpt: 9/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANDERS, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75092	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, CHRISTINA <hr/> Contributor address; City; State; Zip Code VAN ALSTYNE, TX 75495	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) GRAYSON COUNTY
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDEN, GREG <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAGENBUCH, BRENT <hr/> Contributor address; City; State; Zip Code DENTON, TX 76210	Amount of Contribution (\$) \$425.00
Principal occupation / Job title (See Instructions) DISTRICT COORDINATOR		Employer (See Instructions) SENATOR BRENT HAGENBUCH
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTON, GINNY <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) JUSTICE OF THE PEACE PCT. #1		Employer (See Instructions) COUNTY OF GRAYSON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/22 Rpt: 10/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTON, GINNY <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75092	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) JUSTICE OF THE PEACE		9 Employer (See Instructions) GRAYSON COUNTY
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTON, MICHAEL <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75091	Amount of Contribution (\$) \$728.71
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDENBURG, MATTHEW <hr/> Contributor address; City; State; Zip Code POTTSBORO, TX 75076	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) GRAYSON COUNTY COMMISSIONER PCT 4		Employer (See Instructions) GRAYSON COUNTY
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWKINS, GAYLA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) GRAYSON COUNTY TREASURER		Employer (See Instructions) GRAYSON COUNTY
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYES, RANDY <hr/> Contributor address; City; State; Zip Code HOWE, TX 75459	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) DESIGN ENGINEER/TEACHER HOWE ISD		Employer (See Instructions) NONE PROVIDED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/22 Rpt: 11/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, JOHN <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75092	7 Amount of Contribution (\$) \$416.41
8 Principal occupation / Job title (See Instructions) DISTRICT ATTORNEY		9 Employer (See Instructions) TEXAS
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUANG, PAUL <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) RICHLAND REAL ESTATE
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNT, GLENN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75313	Amount of Contribution (\$) \$155.15
Principal occupation / Job title (See Instructions) DATA ANALYST		Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVEY, JR., HOYT <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) WAREHOUSE SUPERVISOR		Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALBFLEISCH, MANDE <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020-2696	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) BUSINESS 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: 9/22 Rpt: 12/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAUFFMAN, WANDA <hr/> 6 Contributor address; City; State; Zip Code DENISON, TX 75021	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) PROGRAM DIRECTOR		9 Employer (See Instructions) NONE PROVIDED
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, BILL <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$1,249.22
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BILL KENNEDY LAW
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, KELLY <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$1,041.02
Principal occupation / Job title (See Instructions) SAHM		Employer (See Instructions) KELLY KENNEDY
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOCH, JUSTIN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) CHIEF JUSTICE		Employer (See Instructions) FIFTH DISTRICT COURT OF APPEALS (STATE OF TEXAS)
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAUSE, PETER <hr/> Contributor address; City; State; Zip Code PLANO, TX 75086	Amount of Contribution (\$) \$104.10
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) THE INSURANCE HOUSE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/22 Rpt: 13/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAUSE, PETER <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75023	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) INSURANCE BROKER		9 Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRUEGER, ADRIANA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) DIETITIAN		Employer (See Instructions) NONE PROVIDED
Date 01/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWSON, BRENT <hr/> Contributor address; City; State; Zip Code VAN ALSTYNE, TX 75495	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, MICHAEL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) JUSTICE		Employer (See Instructions) COURT OF APPEALS
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTHER, SHELLEY <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$832.81
Principal occupation / Job title (See Instructions) BUSINESS 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: 11/22 Rpt: 14/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTHER, SHELLEY <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75090	7 Amount of Contribution (\$) \$3,000.00
8 Principal occupation / Job title (See Instructions) SALON OWNER		9 Employer (See Instructions) SELF
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYNCH, ALTON <hr/> Contributor address; City; State; Zip Code DENISON, TX 75021	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) LIFE INSURANCE AGENCY		Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARR, JOSH <hr/> Contributor address; City; State; Zip Code VAN ALSTYNE, TX 75495	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) COUNTY COMMISSIONER		Employer (See Instructions) GRAYSON COUNTY
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARR, REGGIE <hr/> Contributor address; City; State; Zip Code HOWE, TX 75459	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, JULIE <hr/> Contributor address; City; State; Zip Code WHITEWRIGHT, TX 75491	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) DENTAL HYGIENIST		Employer (See Instructions) NONE PROVIDED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/22 Rpt: 15/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOY, ROBIN <hr/> 6 Contributor address; City; State; Zip Code HOWE, TX 75459	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGOWAN, JODY <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, MARITA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$520.51
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, MARITA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, SID <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) COMMISSIONER		Employer (See Instructions) GRAYSON COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/22 Rpt: 16/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONK, ROBERT <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75090	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, PATRICIA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75091	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORMAN, CYNTHIA <hr/> Contributor address; City; State; Zip Code DENISON, TX 75021	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) SENIOR FINANCIAL ANALYST - RETIRED		Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORMAN, CYNTHIA <hr/> Contributor address; City; State; Zip Code DENISON, TX 75021	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESMITH, SHAWN <hr/> Contributor address; City; State; Zip Code TIOGA, TX 76271	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) HANKINSEASTUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/22 Rpt: 17/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OVERBEY, TIM 6 Contributor address; City; State; Zip Code SHERMAN, TX 75092	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWEN, SARAH Contributor address; City; State; Zip Code WHITEWRIGHT, TX 75491	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) PUBLISHER		Employer (See Instructions) NONE PROVIDED
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, JAMES Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, JAMES Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, ROBIN Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) PARAGON REALTORS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/22 Rpt: 18/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESTON, MELINDA <hr/> 6 Contributor address; City; State; Zip Code FRISCO, TX 75033	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDDIC, TAMMY <hr/> Contributor address; City; State; Zip Code WHITEWRIGHT, TX 75491	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) DEPUTY COUNTY CLERK		Employer (See Instructions) GRAYSON COUNTY
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RENTFRO, JOHN <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ART SALES		Employer (See Instructions) NONE PROVIDED
Date 01/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, DIANA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$52.05
Principal occupation / Job title (See Instructions) VOL. COMMUNICATIONS COORD		Employer (See Instructions) MATTHEWXXVIII GROUP MINISTRY
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, DIANA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$335.00
Principal occupation / Job title (See Instructions) VOL. COMMUNICATIONS COORD		Employer (See Instructions) MATTHEWXXVIII GROUP MINISTRY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/22 Rpt: 19/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSSINI, GINO <hr/> 6 Contributor address; City; State; Zip Code IRVING, TX 75061	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) JUSTICE		9 Employer (See Instructions) FIFTH DISTRICT COURT OF APPEALS (STATE OF TEXAS)
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, MIKE <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERMAN, RACHEL <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$41.64
Principal occupation / Job title (See Instructions) INSURANCE BROKER BUSINESS OWNER		Employer (See Instructions) ASPECT INSURANCE SERVICES
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERMAN, RACHEL <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) INSURANCE BROKER		Employer (See Instructions) SELF
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOEMAKER, LARRY <hr/> Contributor address; City; State; Zip Code COLLINSVILLE, TX 76233	Amount of Contribution (\$) \$150.00
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: 17/22 Rpt: 20/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILEVEN, DAVID 6 Contributor address; City; State; Zip Code VAN ALSTYNE, TX 75495	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) VICE PRESIDENT SOFTWARE SERVICES		9 Employer (See Instructions) NONE PROVIDED
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, JOHN Contributor address; City; State; Zip Code WHITEWRIGHT, TX 75491	Amount of Contribution (\$) \$900.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, JOHN Contributor address; City; State; Zip Code WHITEWRIGHT, TX 75491	Amount of Contribution (\$) \$1,100.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, JOHN Contributor address; City; State; Zip Code WHITEWRIGHT, TX 75491	Amount of Contribution (\$) \$235.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, JAMES Contributor address; City; State; Zip Code MEAD, OK 73449	Amount of Contribution (\$) \$676.66
Principal occupation / Job title (See Instructions) POOL REPAIR		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: 18/22 Rpt: 21/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, SHANNON 6 Contributor address; City; State; Zip Code MEAD, OK 73449	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		9 Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, HOWARD Contributor address; City; State; Zip Code DENISON, TX 75021	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) NONE PROVIDED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MICHAEL Contributor address; City; State; Zip Code DENISON, TX 75021	Amount of Contribution (\$) \$20.82
Principal occupation / Job title (See Instructions) PAYROLL		Employer (See Instructions) EAGLE EMPLOYER SERVICES, LLC
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MICHAEL Contributor address; City; State; Zip Code DENISON, TX 75021	Amount of Contribution (\$) \$1,200.00
Principal occupation / Job title (See Instructions) PAYROLL		Employer (See Instructions) EAGLE EMPLOYER SERVICES, LLC
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, KEVIN Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) ESH		Employer (See Instructions) NONE PROVIDED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/22 Rpt: 22/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, LINDA <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75090	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, ZACHARY <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CAMPAIGN STAFFER		Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, ZACHARY <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) CAMPAIGN STAFFER		Employer (See Instructions) NONE PROVIDED
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEAMANN, SHAWN <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$936.91
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) SHAWN TEAMANN
Date 01/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, DAN <hr/> Contributor address; City; State; Zip Code POTTSBORO, TX 75076	Amount of Contribution (\$) \$416.41
Principal occupation / Job title (See Instructions) FINANCIAL ADVISOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/22 Rpt: 23/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, DAN <hr/> 6 Contributor address; City; State; Zip Code POTTSBORO, TX 75076	7 Amount of Contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions) SELF		9 Employer (See Instructions) SELF
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMASON, SALLY <hr/> Contributor address; City; State; Zip Code POTTSBORO, TX 75076	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED MEDIA		Employer (See Instructions) NONE PROVIDED
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, SHERRY <hr/> Contributor address; City; State; Zip Code POTTSBORO, TX 75076	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOWERS, ROBERT <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PATIENT ADVOCATE		Employer (See Instructions) COMPSPEC
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAVIS, MICHELLE <hr/> Contributor address; City; State; Zip Code TEXAS, TX 75021	Amount of Contribution (\$) \$20.82
Principal occupation / Job title (See Instructions) CPR INSTRUCTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/22 Rpt: 24/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAVIS, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code DENISON, TX 75021-4018	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULTEIG, BETHANY <hr/> Contributor address; City; State; Zip Code TIOGA, TX 76271	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEALE, DARREN <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$26.03
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) MODERN EXPLORATION, INC
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEALE, DARREN <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SELF
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATERS, JULIA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) ADMIN		Employer (See Instructions) GRAYSON CO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/22 Rpt: 25/42
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code WHITESBORO, TX 76273	7 Amount of Contribution (\$) \$15.62
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, WILLIAM <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, LINDSAY <hr/> Contributor address; City; State; Zip Code COLLINSVILLE, TX 76233	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) COMMISSIONER		Employer (See Instructions) NONE PROVIDED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYLIE, ANNA <hr/> Contributor address; City; State; Zip Code DENISON, TX 75021	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYSOCKI, ASHLEY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$4,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/17 Rpt: 26/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/02/2026	5 Payee name A1 WEDDING AND EVENT RENTAL	
6 Amount (\$) \$246.62	7 Payee address; City; State; Zip Code 3034 WOODLAWN BLVD DENISON, TX 75020	
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 LRD EXPENSES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/22/2026	Payee name ALEXANDER, STACY	
Amount (\$) \$304.29	Payee address; City; State; Zip Code 2088 OLD SOUTHMAYD RD SHERMAN, TX 75092	
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 EXPENSES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/12/2026	Payee name AMAZON	
Amount (\$) \$29.72	Payee address; City; State; Zip Code 440 TERRY AVE N 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 SUPPLIES
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/17 Rpt: 27/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Payee name AMAZON	
6 Amount (\$) \$21.16	7 Payee address; City; State; Zip Code 440 TERRY AVE N 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 SUPPLIES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/21/2026	Candidate/Officeholder name Office sought Office held	
Payee name AMAZON		
Amount (\$) \$583.31	Payee address; City; State; Zip Code 440 TERRY AVE N 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 LRD EXPENSES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/09/2026	Candidate/Officeholder name Office sought Office held	
Payee name ATLANTIC ENERGY		
Amount (\$) \$38.54	Payee address; City; State; Zip Code PO BOX 7780 SPRING, TX 77387	
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 HQ ELECTRICITY
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/17 Rpt: 28/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/15/2026	5 Payee name ATMOS ENERGY	
6 Amount (\$) \$162.07	7 Payee address; City; State; Zip Code 5111 N BLUE FLAME RD SHERMAN, TX 75090	
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 HQ GAS
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/05/2026	Candidate/Officeholder name Payee name BON APPETIT YALL	
Amount (\$) \$2,268.00	Payee address; City; State; Zip Code 4616 S HWY 75 DENISON, TX 75020	
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 LRD EXPENSES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/12/2026	Candidate/Officeholder name Payee name BON APPETIT YALL	
Amount (\$) \$1,999.20	Payee address; City; State; Zip Code 4616 S HWY 75 DENISON, TX 75020	
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 LRD EXPENSES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/17 Rpt: 29/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Payee name BON APPETIT YALL	
6 Amount (\$) \$624.75	7 Payee address; City; State; Zip Code 4616 S HWY 75 DENISON, TX 75020	
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 LRD EXPENSES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/20/2026	Candidate/Officeholder name Payee name BON APPETIT YALL	
Amount (\$) \$199.92	Payee address; City; State; Zip Code 4616 S HWY 75 DENISON, TX 75020	
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 LRD EXPENSES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/20/2026	Candidate/Officeholder name Payee name BON APPETIT YALL	
Amount (\$) \$49.98	Payee address; City; State; Zip Code 4616 S HWY 75 DENISON, TX 75020	
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 LRD EXPENSES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/17 Rpt: 30/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/20/2026	5 Payee name CITY OF SHERMAN	
6 Amount (\$) \$312.50	7 Payee address; City; State; Zip Code PO BOX 1106 SHERMAN, TX 75091	
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 LRD EXPENSES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/02/2026	Payee name FACEBOOK	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 1 HACKER WAY MENLO PARK, CA 94025	
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 HQ SOCIAL MEDIA
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/22/2026	Payee name MUNICIPAL ONLINE PAYME	
Amount (\$) \$1.25	Payee address; City; State; Zip Code PO BOX 1106 SHERMAN, TX 75091	
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 HQ UTILITIES
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/17 Rpt: 31/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/20/2026	5 Payee name OFFICE DEPOT	
6 Amount (\$) \$285.10	7 Payee address; City; State; Zip Code 4015 N HWY 75 SHERMAN, TX 75090	
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 LRD EXPENSES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/20/2026	Payee name PARISH-SMITH, SARA	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 6301 RIVERSIDE DR IRVING, TX 75039	
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 LRD EXPENSES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/21/2026	Payee name SHERMAN UTILITY	
Amount (\$) \$49.64	Payee address; City; State; Zip Code PO BOX 1106 SHERMAN, TX 75091	
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 HQ UTILITIES
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/17 Rpt: 32/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/14/2026	5 Payee name TICKET SPICE	
6 Amount (\$) \$976.74	7 Payee address; City; State; Zip Code 1200 2ND ST SACRAMENTO, CA 95814	
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 E-COMMERCE FEES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/21/2026	Payee name TICKET SPICE	
Amount (\$) \$79.76	Payee address; City; State; Zip Code 1200 2ND ST SACRAMENTO, CA 95814	
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 E-COMMERCE FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/20/2026	Payee name TX CUSTOM CREATIONS	
Amount (\$) \$42.50	Payee address; City; State; Zip Code N/A DENISON, TX 75020	
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 TSHIRT EXPENSE
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/17 Rpt: 33/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/01/2026	5 Payee name WINRED	
6 Amount (\$) \$2.05	7 Payee address; City; State; Zip Code 1781 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/08/2026	Payee name WINRED	
Amount (\$) \$0.99	Payee address; City; State; Zip Code 1780 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/14/2026	Payee name WINRED	
Amount (\$) \$1.03	Payee address; City; State; Zip Code 1779 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/17 Rpt: 34/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/15/2026	5 Payee name WINRED	
6 Amount (\$) \$2.96	7 Payee address; City; State; Zip Code 1778 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/15/2026	Payee name WINRED	
Amount (\$) \$1.64	Payee address; City; State; Zip Code 1777 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/16/2026	Payee name WINRED	
Amount (\$) \$0.82	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/17 Rpt: 35/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/17/2026	5 Payee name WINRED	
6 Amount (\$) \$0.62	7 Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2026	Payee name WINRED	
Amount (\$) \$16.41	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2026	Payee name WINRED	
Amount (\$) \$35.46	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/17 Rpt: 36/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/17/2026	5 Payee name WINRED	
6 Amount (\$) \$49.22	7 Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2026	Payee name WINRED	
Amount (\$) \$157.60	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2026	Payee name WINRED	
Amount (\$) \$26.66	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/17 Rpt: 37/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/17/2026	5 Payee name WINRED	
6 Amount (\$) \$41.02	7 Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2026	Payee name WINRED	
Amount (\$) \$32.81	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2026	Payee name WINRED	
Amount (\$) \$36.91	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/17 Rpt: 38/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/17/2026	5 Payee name WINRED	
6 Amount (\$) \$43.34	7 Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2026	Payee name WINRED	
Amount (\$) \$28.71	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2026	Payee name WINRED	
Amount (\$) \$98.50	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/17 Rpt: 39/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/17/2026	5 Payee name WINRED	
6 Amount (\$) \$0.82	7 Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2026	Payee name WINRED	
Amount (\$) \$20.51	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2026	Payee name WINRED	
Amount (\$) \$13.20	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/17 Rpt: 40/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/17/2026	5 Payee name WINRED	
6 Amount (\$) \$9.26	7 Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2026	Payee name WINRED	
Amount (\$) \$6.90	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2026	Payee name WINRED	
Amount (\$) \$4.10	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/17 Rpt: 41/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/18/2026	5 Payee name WINRED	
6 Amount (\$) \$7.88	7 Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/18/2026	Payee name WINRED	
Amount (\$) \$0.99	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/18/2026	Payee name WINRED	
Amount (\$) \$16.41	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/17 Rpt: 42/42	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/20/2026	5 Payee name WINRED	
6 Amount (\$) \$0.79	7 Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/20/2026	Payee name WINRED	
Amount (\$) \$2.05	Payee address; City; State; Zip Code 1776 WILSON BLVS STE 350 ARLINGTON, VA 22209	
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 E-COMMERCE FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held