

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00085254	<b>2</b> Total pages filed: 59
<b>3</b> COMMITTEE NAME Southeast Texas Republican Women		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 07/02/2023	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 1071  Nederland, TX 77627		
	<b>5</b> CAMPAIGN TREASURER NAME  MS / MRS / MR FIRST MI Ms. Patricia A.  NICKNAME LAST SUFFIX Pat Greene		
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2225 Stillwater Dr.  Beaumont, TX 77705		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 225 Stillwater Dr.  Beaumont, TX 77705		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (409) 626-2585		
<b>9</b> REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
<b>10</b> PERIOD COVERED	Month Day Year      Month Day Year 01/01/2023      THROUGH      06/30/2023		
<b>11</b> ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special No elections during this period	

**GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Southeast Texas Republican Women	<b>13 Filer ID</b> (Ethics Commission Filers) 00085254
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	Political party not specified.

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 8,543.75
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 7,940.40
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 2,532.67
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 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.

Ms. Patricia A. Greene  
\_\_\_\_\_  
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

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**  
ADDENDUM

Page 3 of 59

<b>12 COMMITTEE NAME</b> Southeast Texas Republican Women		<b>13 Filer ID</b> (Ethics Commission Filers) 00085254
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Republican
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# SUBTOTALS - GPAC

<b>17 COMMITTEE NAME</b> Southeast Texas Republican Women		<b>18 Filer ID</b> (Ethics Commission Filers) 00085254
<b>19 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 8,533.75
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 10.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 7,940.40
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.66

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/41 Rpt: 5/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 02/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ashrafi, Mahmoona (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77707	<b>7</b> Amount of Contribution (\$)  \$26.50
<b>8</b> Principal occupation / Job title (See Instructions) Commerical Realtor		<b>9</b> Employer (See Instructions) Self
Date 01/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ashrafi, Mahmoona (Mr.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Commerical Realtor		Employer (See Instructions) Self
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ashrafi, Mahmoona (Mr.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$77.33
Principal occupation / Job title (See Instructions) Commerical Realtor		Employer (See Instructions) Self
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Block, April (Ms.) <hr/> Contributor address; City; State; Zip Code  Orange, TX 77630	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 01/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Block, April (Ms.) <hr/> Contributor address; City; State; Zip Code  Orange, TX 77630	Amount of Contribution (\$)  \$26.50
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/41 Rpt: 6/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 01/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Block, Michael (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Orange, TX 77630	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Supervisor		<b>9</b> Employer (See Instructions)
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bordelon, Elizabeth (Ms.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$53.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bordelon, Elizabeth (Ms.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bordelon, Elizabeth (Ms.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bordelon, Elizabeth (Ms.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/41 Rpt: 7/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 05/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bordelon, Elizabeth (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77707	
<b>8</b> Principal occupation / Job title (See Instructions) Clerk		<b>9</b> Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bordelon, Elizabeth (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Beaumont, TX 77707	
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bordelon, Elizabeth (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Beaumont, TX 77707	
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bordelon, Michael (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Branick, Jeff (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Pt. Neches, TX 77251	
Principal occupation / Job title (See Instructions) Jefferson County Judge		Employer (See Instructions) Jefferson County

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/41 Rpt: 8/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 01/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bridger, Rick (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Bridge City, TX 77611	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brinkley, Dean (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Autumn (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Janet (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Pt. Neches, TX 77651	
Principal occupation / Job title (See Instructions) Regional Casework Dir.		Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Janet (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Pt. Neches, TX 77651	
Principal occupation / Job title (See Instructions) Regional Casework Dir.		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/41 Rpt: 9/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 02/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Janet (Ms.)	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Pt. Neches, TX 77651	
<b>8</b> Principal occupation / Job title (See Instructions) Regional Casework Dir.		<b>9</b> Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Janet (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Pt. Neches, TX 77651	
Principal occupation / Job title (See Instructions) Regional Casework Dir.		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Janet (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Pt. Neches, TX 77651	
Principal occupation / Job title (See Instructions) Regional Casework Dir.		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Linda (Ms.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Pt. Neches, TX 77651	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Dina	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Beaumont, TX 77705	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/41 Rpt: 10/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 02/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Dina	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77705		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Dina (Ms.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Beaumont, TX 77705		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Dina (Ms.)	Amount of Contribution (\$) \$91.50
Contributor address; City; State; Zip Code  Beaumont, TX 77705		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Dina (Ms.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Beaumont, TX 77705		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Dina (Ms.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Beaumont, TX 77705		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/41 Rpt: 11/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 05/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Dina (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77705	<b>7</b> Amount of Contribution (\$)  \$128.36
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Dina (Ms.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Dina (Ms.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Dina (Ms.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$25.71
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cates, Norma (Ms.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/41 Rpt: 12/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 03/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cates, Norma (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cates, Norma (Ms.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cates, Norma (Ms.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$50.78
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chambers, Kent (Mr.) <hr/> Contributor address; City; State; Zip Code  Willis , TX 77378	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cousins, Christina (Ms.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Marketing Rep		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/41 Rpt: 13/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 01/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dishman, Cindy (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77706	
<b>8</b> Principal occupation / Job title (See Instructions) Unemployed		<b>9</b> Employer (See Instructions)
Date 01/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dyer, Holli (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Pt. Neches, TX 77651	
Principal occupation / Job title (See Instructions) X Ray Tech		Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dyer, Kim (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Pt. Neches, TX 77651	
Principal occupation / Job title (See Instructions) Teller Supervisor		Employer (See Instructions)
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dyer, Kim (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Pt. Neches, TX 77651	
Principal occupation / Job title (See Instructions) Teller Supervisor		Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebeling, Jeanene (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Port Arthur, TX 77640	
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/41 Rpt: 14/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 02/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebeling, Jeanene (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Port Arthur, TX 77640	
<b>8</b> Principal occupation / Job title (See Instructions) Bookkeeper		<b>9</b> Employer (See Instructions)
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebeling, Jeanene (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Port Arthur, TX 77640	
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebeling, Jeanene (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Port Arthur, TX 77640	
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebeling, Jeanene (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Port Arthur, TX 77640	
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebeling, Jeanene (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Port Arthur, TX 77640	
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/41 Rpt: 15/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 06/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebeling, Jeanene (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Port Arthur, TX 77640	
<b>8</b> Principal occupation / Job title (See Instructions) Bookkeeper		<b>9</b> Employer (See Instructions)
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ebeling, Michael (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Port Arthur, TX 77640	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Betty (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Betty (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Betty (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/41 Rpt: 16/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 05/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Betty (Ms.)	<b>7</b> Amount of Contribution (\$) <span style="float:right">\$25.00</span>
	<b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
<b>Date</b> 06/17/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, Betty (Ms.)	<b>Amount of Contribution (\$)</b> <span style="float:right">\$25.00</span>
	<b>Contributor address; City; State; Zip Code</b>  Nederland, TX 77627	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 02/08/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erickson, Cary (Mr.)	<b>Amount of Contribution (\$)</b> <span style="float:right">\$53.00</span>
	<b>Contributor address; City; State; Zip Code</b>  Nederland, TX 77627	
<b>Principal occupation / Job title (See Instructions)</b> County Commissioner		<b>Employer (See Instructions)</b>
<b>Date</b> 04/12/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erickson, Cary (Mr.)	<b>Amount of Contribution (\$)</b> <span style="float:right">\$51.52</span>
	<b>Contributor address; City; State; Zip Code</b>  Nederland, TX 77627	
<b>Principal occupation / Job title (See Instructions)</b> County Commissioner		<b>Employer (See Instructions)</b>
<b>Date</b> 05/11/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erickson, Cary (Mr.)	<b>Amount of Contribution (\$)</b> <span style="float:right">\$50.00</span>
	<b>Contributor address; City; State; Zip Code</b>  Nederland, TX 77627	
<b>Principal occupation / Job title (See Instructions)</b> County Commissioner		<b>Employer (See Instructions)</b> Jefferson County



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/41 Rpt: 17/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 05/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erickson, Cary (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627	<b>7</b> Amount of Contribution (\$) \$25.71
<b>8</b> Principal occupation / Job title (See Instructions) County Commissioner		<b>9</b> Employer (See Instructions) Jefferson County
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erickson, Sandra (Ms.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) secretary		Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Errington, Marie (Ms.) <hr/> Contributor address; City; State; Zip Code  Port Arthur, TX 77642	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Errington, Marie (Ms.) <hr/> Contributor address; City; State; Zip Code  Port Arthur, TX 77642	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Errington, Marie (Ms.) <hr/> Contributor address; City; State; Zip Code  Port Arthur, TX 77642	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/41 Rpt: 18/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 04/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Errington, Marie (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Port Arthur, TX 77642	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Errington, Marie (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Port Arthur, TX 77642	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Errington, Marie (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Port Arthur, TX 77642	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forey, Hope (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  NEDERLAND, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forey, Hope (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  NEDERLAND, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/41 Rpt: 19/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 05/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Forey, Hope (Ms.)	<b>7</b> Amount of Contribution (\$)  \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  NEDERLAND, TX 77627	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Freisz, Gordon (Judge)	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) District Judge		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Friesz, Gordan (Mr.)	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)
Date 03/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Golemon, Scott (Judge)	Amount of Contribution (\$)  \$26.50
	Contributor address; City; State; Zip Code  Cut N Shoot, TX 77306	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Golmon, Scott (Judge)	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code  Cut N Shoot, TX 77306	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/41 Rpt: 20/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 01/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Green, Donna (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627	
<b>8</b> Principal occupation / Job title (See Instructions) Office Manager		<b>9</b> Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Green, Donna (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Green, Donna (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Green, Donna (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Green, Donna (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/41 Rpt: 21/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 06/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Donna (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627	
<b>8</b> Principal occupation / Job title (See Instructions) Office Manager		<b>9</b> Employer (See Instructions)
Date 01/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Beaumont, TX 77705	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Beaumont, TX 77705	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Beaumont, TX 77705	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Beaumont, TX 77705	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/41 Rpt: 22/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 01/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Patricia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77705	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Patricia <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Patricia <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Patricia <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Patricia (Ms.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$308.14
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/41 Rpt: 23/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 05/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Patricia (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77705	<b>7</b> Amount of Contribution (\$)  \$25.43
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Patricia (Ms.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$24.94
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Patricia (Ms.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$5.06
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Patricia (Ms.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guevara, Luis (Mr.) <hr/> Contributor address; City; State; Zip Code  NEDERLAND, TX 77627	Amount of Contribution (\$)  \$154.56
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/41 Rpt: 24/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 01/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hall, Ann (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hall, Ann (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hall, Ann (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hall, Ann (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hall, Ann (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 21/41 Rpt: 25/59
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 05/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ann (Ms.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code  Nederland, TX 77627	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ann (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Shirley (Ms.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  Crystal Beach, TX 77650	
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hargraves, Caroline (Ms.)	Amount of Contribution (\$) \$65.91
	Contributor address; City; State; Zip Code  Winnie, TX 77665	
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Jennifer (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Lumberton, TX 77657	
Principal occupation / Job title (See Instructions) Staff		Employer (See Instructions) Senator Robert Nichols

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 22/41 Rpt: 26/59
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 01/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris, Sally (Ms.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code  Nederland, TX 77627	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris, Sally (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris, Sally (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris, Sally (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris, Sally (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/41 Rpt: 27/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 05/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris, Sally (Ms.) ..... <b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris, Sally (Ms.) ..... Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris, Sally (Ms.) ..... Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hellberg, Roxanne (Ms.) ..... Contributor address; City; State; Zip Code  Beaumont, TX 77713	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) County Clerk		Employer (See Instructions)
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henderson, Elaine (Ms.) ..... Contributor address; City; State; Zip Code  Beaumont, TX 77726	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/41 Rpt: 28/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 01/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henderson, Elaine (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77726	
<b>8</b> Principal occupation / Job title (See Instructions) Self Employed		<b>9</b> Employer (See Instructions)
<b>Date</b> 03/08/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henderson, Elaine (Ms.)	<b>Amount of Contribution (\$)</b> \$26.50
	<b>Contributor address; City; State; Zip Code</b>  Beaumont, TX 77726	
<b>Principal occupation / Job title (See Instructions)</b> Self Employed		<b>Employer (See Instructions)</b>
<b>Date</b> 04/12/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henderson, Elaine (Ms.)	<b>Amount of Contribution (\$)</b> \$25.43
	<b>Contributor address; City; State; Zip Code</b>  Beaumont, TX 77726	
<b>Principal occupation / Job title (See Instructions)</b> Self Employed		<b>Employer (See Instructions)</b>
<b>Date</b> 06/17/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holland, Beverly (Ms.)	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Pt. Arthur , TX 77640	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 01/09/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hollier, Emmett (Mr.)	<b>Amount of Contribution (\$)</b> \$26.50
	<b>Contributor address; City; State; Zip Code</b>  Nederland, TX 77627	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/41 Rpt: 29/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 04/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hollier, Emmett (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627	<b>7</b> Amount of Contribution (\$)  \$25.43
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 06/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hollier, Emmett (Mr.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$25.43
Principal occupation / Job title (See Instructions) Oil Field Consultant		Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huber, Carolyn (Ms.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huber, Carolyn (Ms.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huber, Carolyn (Ms.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/41 Rpt: 30/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 04/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ibarra, Elias (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77706	
<b>8</b> Principal occupation / Job title (See Instructions) Hispanic Republican Party		<b>9</b> Employer (See Instructions)
<b>Date</b> 05/11/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ibarra, Elias (Mr.)	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Beaumont, TX 77706	
<b>Principal occupation / Job title (See Instructions)</b> Hispanic Republican Party		<b>Employer (See Instructions)</b>
<b>Date</b> 01/04/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jackson, Paul (Mr.)	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Pt. Arthur, TX 77641	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 01/13/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jackson, Paul (Mr.)	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Pt. Arthur, TX 77641	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 02/08/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jackson, Paul (Mr.)	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Pt. Arthur, TX 77641	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/41 Rpt: 31/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 04/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jackson, Paul (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Pt. Arthur, TX 77641	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jackson, Paul (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Pt. Arthur, TX 77641	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maggio, Marie (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Beaumont, TX 77706	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maggio, Pearl (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  The Woodlands, TX 77384	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McAdams, Tayler (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Medical Assistant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/41 Rpt: 32/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 04/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Melancon, Rhonda (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Meza, Erika (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland , TX 77627	
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Meza, Erika (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Michalk, Cole (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Beaumont, TX 77707	
Principal occupation / Job title (See Instructions) Staff of Brandom Creighton		Employer (See Instructions)
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Danny (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Pt. Neches, TX 77651	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/41 Rpt: 33/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 02/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Danny (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Pt. Neches, TX 77651	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Danny (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Pt. Neches, TX 77651	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Danny (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Pt. Neches, TX 77651	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ochoa, Raquel (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ochoa, Raquel (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/41 Rpt: 34/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 01/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ozio, Wayne (Mr.)	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627		
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ozio, Wayne (Mr.)	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Nederland, TX 77627		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pacetti, Rodney (Mr.)	Amount of Contribution (\$) \$26.50
Contributor address; City; State; Zip Code  Groves, TX 77619		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pacetti, Rodney (Mr.)	Amount of Contribution (\$) \$26.50
Contributor address; City; State; Zip Code  Groves, TX 77619		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pacetti, Rodney (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Groves, TX 77619		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/41 Rpt: 35/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 05/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacetti, Rodney (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Groves, TX 77619	<b>7</b> Amount of Contribution (\$)  \$97.30
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickren, Julie (Ms.) <hr/> Contributor address; City; State; Zip Code  Manvel, TX 77578	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poindexter, Debra (Ms.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poindexter, Debra (Ms.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poindexter, Debra (Ms.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$91.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/41 Rpt: 36/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 03/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Poindexter, Debra (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Poindexter, Debra (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Poindexter, Debra (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Poindexter, Debra (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Polk, Janet (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/41 Rpt: 37/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 01/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Polk, Janet (Ms.)	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramirez, Nancy (Ms.)	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Groves, TX 77619		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramirez, Nancy (Ms.)	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Groves, TX 77619		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramirez, Nancy (Ms.)	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Groves, TX 77619		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramirez, Nancy (Ms.)	Amount of Contribution (\$)  \$85.00
Contributor address; City; State; Zip Code  Groves, TX 77619		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/41 Rpt: 38/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 05/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramirez, Nancy (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Groves, TX 77619	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramirez, Nancy (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Groves, TX 77619	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Read, Lanora (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Port Neches, TX 77651	
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Read, Lanora (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Port Neches, TX 77651	
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Read, Lanora (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Port Neches, TX 77651	
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/41 Rpt: 39/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 04/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Read, Lanora (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Port Neches, TX 77651	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Registered Nurse		<b>9</b> Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Read, Lanora (Ms.) <hr/> Contributor address; City; State; Zip Code  Port Neches, TX 77651	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Read, Lanora (Ms.) <hr/> Contributor address; City; State; Zip Code  Port Neches, TX 77651	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reid, Sherrie (Ms.) <hr/> Contributor address; City; State; Zip Code  Bridge City, TX 77611	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reid, Sherrie (Ms.) <hr/> Contributor address; City; State; Zip Code  Bridge City, TX 77611	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/41 Rpt: 40/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 03/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reid, Sherrie (Ms.)	<b>7</b> Amount of Contribution (\$)  \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Bridge City, TX 77611	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reid, Sherrie (Ms.)	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code  Bridge City, TX 77611	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rice, Kitti (Ms.)	Amount of Contribution (\$)  \$25.43
	Contributor address; City; State; Zip Code  Hamshire, TX 77622	
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seymour, Blaine (Ms.)	Amount of Contribution (\$)  \$26.50
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Lamar Counseling		Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Siragusa, Dora (Ms.)	Amount of Contribution (\$)  \$50.00
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/41 Rpt: 41/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 06/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Siragusa, Dora (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Julia <hr/> Contributor address; City; State; Zip Code  Port Neches, TX 77651	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Julia <hr/> Contributor address; City; State; Zip Code  Port Neches, TX 77651	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Julia <hr/> Contributor address; City; State; Zip Code  Port Neches, TX 77651	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Julia (Ms.) <hr/> Contributor address; City; State; Zip Code  Pt. Neches, TX 77651	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/41 Rpt: 42/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 02/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Sandra (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Sandra (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Sandra (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Sandra (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Sandra (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/41 Rpt: 43/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 02/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Sandra (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Sandra (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Sandra (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Sandra (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Sandra (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 40/41 Rpt: 44/59
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 05/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Sandra (Ms.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code  Nederland, TX 77627	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Sandra (Ms.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Templeton, Mitch (Judge)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Beaumont , TX 77701	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) 172nd
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Lajuanda (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williamson, Kat (Dr.)	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  Nederland, TX 77627	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/41 Rpt: 45/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 04/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williamson, Kat (Dr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627	<b>7</b> Amount of Contribution (\$)  \$77.33
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williamson, Kat (Dr.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$77.33
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williamson, Kat (Dr.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$77.33
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Jay (Mr.) <hr/> Contributor address; City; State; Zip Code  Conroe, TX 77302	Amount of Contribution (\$)  \$26.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Jay (Mr.) <hr/> Contributor address; City; State; Zip Code  Conroe, TX 77302	Amount of Contribution (\$)  \$53.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/1 Rpt: 46/59	
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 04/12/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat	8 Amount of contribution (\$) \$10.00	9 In-kind contribution description
	7 Contributor address; City; State; Zip Code  Beaumont, TX 77705	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/11 Rpt: 47/59	<b>2</b> FILER NAME Southeast Texas Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 02/08/2023	<b>5</b> Payee name 2022 Block inc.	
<b>6</b> Amount (\$) \$4.19  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1455 Market St. Ste. 600  San Francisco, TX 94103	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/13/2023	Payee name 2022 Block inc.	
Amount (\$) \$3.21  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St. Ste. 600  San Francisco, TX 94103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</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 04/12/2023	Payee name 2022 Block inc.	
Amount (\$) \$5.79  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St. Ste. 600  San Francisco, TX 94103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service 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  
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.

<b>1</b> Total pages Schedule F1: Sch: 2/11 Rpt: 48/59	<b>2</b> FILER NAME Southeast Texas Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 05/09/2023	<b>5</b> Payee name 2023 Square, Inc.	
<b>6</b> Amount (\$) \$15.69  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1455Market St. Suite 600  San Francisco, CA 94103	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</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 Sales
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/24/2023	Payee name 2023 Square, Inc.	
Amount (\$) \$1.21  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455Market St. Suite 600  San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense service charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/14/2023	Payee name 2023 Square, Inc.	
Amount (\$) \$6.56  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St. Suite 600  San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</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 Sale fee
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  
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.

<b>1</b> Total pages Schedule F1: Sch: 3/11 Rpt: 49/59	<b>2</b> FILER NAME Southeast Texas Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 01/16/2023	<b>5</b> Payee name 23Block Inc.	
<b>6</b> Amount (\$) \$10.99  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1455Market St. Ste.600  San Francisco, CA 94103	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2023	Payee name Bordelon, Elizabeth (Ms.)	
Amount (\$) \$35.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2924 Ave L  Nederland, TX 77627	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Returned check
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/13/2023	Payee name CARR, DINA	
Amount (\$) \$89.68  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2225 Stillwater Dr.  Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Ads,	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
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  
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.

<b>1</b> Total pages Schedule F1: Sch: 4/11 Rpt: 50/59	<b>2</b> FILER NAME Southeast Texas Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 01/11/2023	<b>5</b> Payee name Carr, Dina	
<b>6</b> Amount (\$) \$231.60  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2225 Stillwater Dr.  Beaumont, TX 77705	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website, Internet
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/16/2023	Candidate/Officeholder name Drago's	
Amount (\$) \$173.20  <input type="checkbox"/> Expenditure from corporate funds	Office sought 3538 Hwy 365  Nederland, TX 77627	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Club Directories
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/17/2023	Candidate/Officeholder name Ebeling, Jeanene (Ms.)	
Amount (\$) \$17.37  <input type="checkbox"/> Expenditure from corporate funds	Office sought 2464 63rd St.  Pt. Arthur, TX 77640	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) supplies	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps & cards
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.

<b>1</b> Total pages Schedule F1: Sch: 5/11 Rpt: 51/59	<b>2</b> FILER NAME Southeast Texas Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 04/20/2023	<b>5</b> Payee name Greene, Pat	
<b>6</b> Amount (\$) \$10.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2225 Stillwater Drive  Beaumont, TX 77705	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Name Badge	<b>(b)</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 Badge for member
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/21/2023	Payee name Greene, Pat	
Amount (\$) \$1,099.89  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4400 Morningstar Pl.  Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</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 02/14/2023	Payee name Greene, Patricia	
Amount (\$) \$700.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4400 Morningstar Place  Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</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  
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.

<b>1</b> Total pages Schedule F1: Sch: 6/11 Rpt: 52/59	<b>2</b> FILER NAME Southeast Texas Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 02/15/2023	<b>5</b> Payee name Greene, Patricia	
<b>6</b> Amount (\$) \$75.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4400 Morningstar Place  Beaumont, TX 77705	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Petty Cash
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/25/2023	Payee name MCT Credit Union	
Amount (\$) \$10.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2736 Nall St  Port Neches, TX 77651	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/25/2023	Payee name MCT Credit Union	
Amount (\$) \$10.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2736 Nall St  Port Neches, TX 77651	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Service 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  
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.

<b>1</b> Total pages Schedule F1: Sch: 7/11 Rpt: 53/59	<b>2</b> FILER NAME Southeast Texas Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 03/25/2023	<b>5</b> Payee name MCT Credit Union	
<b>6</b> Amount (\$) \$10.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2736 Nall St  Port Neches, TX 77651	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/25/2023	Payee name MCT Credit Union	
Amount (\$) \$10.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2736 Nall St  Port Neches, TX 77651	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Service Charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/24/2023	Payee name MCT Credit Union	
Amount (\$) \$10.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2736 Nall St  Port Neches, TX 77651	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense monthly service 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  
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.

<b>1</b> Total pages Schedule F1: Sch: 8/11 Rpt: 54/59	<b>2</b> FILER NAME Southeast Texas Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 06/21/2023	<b>5</b> Payee name MCT Credit Union	
<b>6</b> Amount (\$) \$10.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2736 Nall St  Port Neches, TX 77651	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2023	Payee name New Beginnings Ministries	
Amount (\$) \$275.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 4040  Pt. Arthur, TX 77641	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</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 03/27/2023	Payee name Poindexter, Debra (Ms.)	
Amount (\$) \$86.60  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2306 Ave, N  Nederland, TX 77627	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Floral arrangement
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  
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.

<b>1</b> Total pages Schedule F1: Sch: 9/11 Rpt: 55/59	<b>2</b> FILER NAME Southeast Texas Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00085254
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<b>4</b> Date 06/05/2023	<b>5</b> Payee name Poindexter, Debra (Ms.)
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<b>6</b> Amount (\$) \$214.68  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2306 Ave, N  Nederland, TX 77627
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Push Cards
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/17/2023	Payee name TFRW
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Amount (\$) \$100.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13740 N. Hwy 183 Ste. J4  Austin, TX 78750
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual dues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/06/2023	Payee name TFRW
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Amount (\$) \$100.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13740 N. Hwy 183 Ste. J4  Austin, TX 78750
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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.

<b>1</b> Total pages Schedule F1: Sch: 10/11 Rpt: 56/59	<b>2</b> FILER NAME Southeast Texas Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00085254
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<b>4</b> Date 05/11/2023	<b>5</b> Payee name TFRW
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<b>6</b> Amount (\$) \$25.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 13740 N. Hwy 183 Ste. J4  Austin, TX 78750
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Membership dues	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual fee
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/12/2023	Payee name TFRW
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Amount (\$) \$75.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13740 N. Hwy 183 Ste. J4  Austin, TX 78750
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Members' Dues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/20/2023	Payee name The Pompanoi
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Amount (\$) \$924.91  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 330 Twin City Hwy.  Pt. Neches, TX 77651
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</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/Beverage
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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.

<b>1</b> Total pages Schedule F1: Sch: 11/11 Rpt: 57/59	<b>2</b> FILER NAME Southeast Texas Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 03/14/2023	<b>5</b> Payee name The Pompanoi	
<b>6</b> Amount (\$) \$874.91  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 330 Twin City Hwy.  Pt. Neches, TX 77651	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</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
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/13/2023	Payee name The Pompanoi	
Amount (\$) \$849.92  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 330 Twin City Hwy.  Pt. Neches, TX 77651	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</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 05/11/2023	Payee name The Pompanoi	
Amount (\$) \$1,875.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 330 Twin City Hwy.  Pt. Neches, TX 77651	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</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

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

SCHEDULE K

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 1/2 Rpt: 58/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 02/01/2023	<b>5</b> Name of person from whom amount is received MCT	<b>8</b> Amount (\$) \$0.09
	<b>6</b> Address of person from whom amount is received; City; State; Zip Code  Pt. Neches, TX 77651	
	<b>7</b> Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	
Date 01/01/2023	Name of person from whom amount is received MCT	Amount (\$) \$0.10
	Address of person from whom amount is received; City; State; Zip Code  Pt. Neches, TX 77651	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	
Date 03/01/2023	Name of person from whom amount is received MCT	Amount (\$) \$0.10
	Address of person from whom amount is received; City; State; Zip Code  Pt. Neches, TX 77651	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	
Date 04/01/2023	Name of person from whom amount is received MCT	Amount (\$) \$0.13
	Address of person from whom amount is received; City; State; Zip Code  Pt. Neches, TX 77651	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	
Date 05/01/2023	Name of person from whom amount is received MCT	Amount (\$) \$0.12
	Address of person from whom amount is received; City; State; Zip Code  Pt. Neches, TX 77651	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

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

SCHEDULE K

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 2/2 Rpt: 59/59
<b>2</b> FILER NAME Southeast Texas Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00085254
<b>4</b> Date 06/01/2023	<b>5</b> Name of person from whom amount is received MCT	<b>8</b> Amount (\$) \$0.12
<b>6</b> Address of person from whom amount is received; City; State; Zip Code  Pt. Neches, TX 77651		
<b>7</b> Purpose for which amount is received		<input type="checkbox"/> Check if political contribution returned to filer