

# 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 Filer ID</b> (Ethics Commission Filers) 00080974	<b>2 Total pages filed:</b> 9
<b>3 COMMITTEE NAME</b> Cherokee County Republican Women		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 07/11/2023	
<b>4 COMMITTEE ADDRESS</b>  <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 807  Jacksonville, TX 75766	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
<b>5 CAMPAIGN TREASURER NAME</b>		MS / MRS / MR FIRST MI Mrs. Karen	
		NICKNAME LAST SUFFIX Morris	
<b>6 CAMPAIGN TREASURER STREET ADDRESS</b> <small>(Residence or Business)</small>		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 955 CR 4120  Jacksonville, TX 75766	
<b>7 CAMPAIGN TREASURER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 955 CR 4120  Jacksonville, TX 75766	
<b>8 CAMPAIGN TREASURER PHONE</b>		AREA CODE PHONE NUMBER EXTENSION (903) 393-2951	
<b>9 REPORT TYPE</b>		<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 PERIOD COVERED</b>		Month Day Year      Month Day Year 01/01/2023      THROUGH      06/30/2023	
<b>11 ELECTION</b>		ELECTION DATE      ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 11/07/2023 <input type="checkbox"/> General <input checked="" type="checkbox"/> Special	

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# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Cherokee County Republican Women	<b>13 Filer ID</b> (Ethics Commission Filers) 00080974
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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.)	

<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)	\$ 1,020.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 1,345.90
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 471.67
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.

Mrs. Karen Morris  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - GPAC

<b>17</b> COMMITTEE NAME Cherokee County Republican Women	<b>18</b> Filer ID (Ethics Commission Filers) 00080974
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<b>19</b> SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,020.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE 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	\$ 1,345.90
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 type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/9
2 FILER NAME Cherokee County Republican Women		3 Filer ID (Ethics Commission Filers) 00080974
4 Date 01/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Batton, Judy	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code  Jacksonville, TX 75766	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 01/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corley, Glynda	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code  Jacksonville, TX 75766	
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) self
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dotson, Allison	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code  Rusk, TX 75785	
Principal occupation / Job title (See Instructions) court coordinator		Employer (See Instructions) Cherokee County
Date 01/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Felt, Kim	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code  Jacksonville, TX 75766	
Principal occupation / Job title (See Instructions) Director of Marketing & Admissions		Employer (See Instructions) Twin Oaks Rehabilitation and Nursing
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lusk, Laverne	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code  Rusk, TX 75785	
Principal occupation / Job title (See Instructions) County clerk		Employer (See Instructions) Cherokee 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: 2/3 Rpt: 5/9
<b>2</b> FILER NAME Cherokee County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00080974
<b>4</b> Date 01/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morris, Karen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions) shop owner		<b>9</b> Employer (See Instructions) Self Employed
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morrison, Betty <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) 
Date 03/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Potter, Shonda <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Clerk Tax Office		Employer (See Instructions) Cherokee County
Date 01/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Slaton, Michele <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) District Coordinator		Employer (See Instructions) Senator Robert Nichols
Date 01/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stanovich, Janet <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Emergency Manager		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/9
2 FILER NAME Cherokee County Republican Women		3 Filer ID (Ethics Commission Filers) 00080974
4 Date 02/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stone, Janice	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code  Rusk, TX 75785	
8 Principal occupation / Job title (See Instructions) County Court at Law Judge		9 Employer (See Instructions) Cherokee County
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tarrant, Meredith	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code  Bullard, TX 75757	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tarrant, Meredith	Amount of Contribution (\$) \$600.00
	Contributor address; City; State; Zip Code  Bullard, TX 75757	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Young, Dana	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code  Rusk, TX 75785	
Principal occupation / Job title (See Instructions) county attorney		Employer (See Instructions) Cherokee County
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Young, Dolores	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code  Jacksonville, TX 75766	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) n/a

# 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: 1/3 Rpt: 7/9	<b>2</b> FILER NAME Cherokee County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00080974
<b>4</b> Date 06/17/2023	<b>5</b> Payee name Cherokee County Republican Party	
<b>6</b> Amount (\$) \$600.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 807  Jacksonville, TX 75766	
<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 Purchase of a table for 8. Party Dinner
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/21/2023	Payee name Morris, Karen	
Amount (\$) \$111.27  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 955 CR 4120  Jacksonville, TX 75766	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Club payed back for membership 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 Reimbursement for out of pocket membership
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/18/2023	Payee name National Federation of Republican Women	
Amount (\$) \$25.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 124 N. Alfred St.  Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Donation to Memorial
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: 2/3 Rpt: 8/9	<b>2</b> FILER NAME Cherokee County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00080974
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<b>4</b> Date 01/27/2023	<b>5</b> Payee name Texas Federation of Republican Women
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<b>6</b> Amount (\$) \$250.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 13740 Hwy 183, Suite 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) 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 Membership fees 2023
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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 05/01/2023	Payee name Texas Federation of Republican Women
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Amount (\$) \$125.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13740 Hwy 183, Suite J4  Austin, TX 78750
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership fees for 2023
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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 06/16/2023	Payee name Texas Federation of Republican Women
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Amount (\$) \$195.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13740 Hwy 183, Suite J4  Austin, TX 78750
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW Convention fee
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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: 3/3 Rpt: 9/9	<b>2</b> FILER NAME Cherokee County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00080974	
<b>4</b> Date 05/19/2023	<b>5</b> Payee name Walmart		
<b>6</b> Amount (\$) \$39.63  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1311 S. Jackson St.  Jacksonville, TX 75766		
<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 Cookout, hamburgers, hotdogs	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held