FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00016322 3 COMMITTEE NAME **OFFICE USE ONLY** Ector County Republican Women's Club Date Received **ELECTRONICALLY FILED** 01/03/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 14537 Date Hand-delivered or Date Postmarked Change of Address Odessa, TX 79768 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Julie NAME NICKNAME LAST **SUFFIX** Adams STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** P.O. Box 14537 STREET **ADDRESS** (Residence or Business) Odessa, TX 79768 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** P.O. Box 14537 MAILING **ADDRESS** Odessa, TX 79768 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (432) 664-3877 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2023 12/31/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 11/07/2023 General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Ector County Republica	ın Women's Club		00016322	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	8,700.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	18,164.06
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	•		•	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Ms. Juli	ie Adams	
		Signature of Ca	mpaign Treasui	rer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, t	his the	day
of	_, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offic	er administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

				3 of 37	
17 COMMIT	FEE NAME	18 Filer ID	(Ethics Con	nmission Filers)	
Ector Co	unty Republican Women's Club	00016322			
	LE SUBTOTALS SCHEDULE	1	SUBT	OTAL AMOUNT	
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	7,605.00	
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	1,095.00	
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS				
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$		
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$		
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$		
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	!	\$		
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$		
9.	SCHEDULE E: LOANS		\$		
10.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$		
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
14. X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	12,239.00	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/17 Rpt: 4/37	
2	FILER NAME Ector County	y Republican Women's Club		3	Filer ID (Ethics Commission 00016322	n Filers)
4	Date 12/13/2023	5 Full name of contributor out-of-state PAC (ID#:_ AMONETT, ASHLEIGH 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00
8	Principal occu	ODESSA, TX 79762 pation / Job title (See Instructions)	Employer (See Instructions)		
_		EX. DIRECTOR	Campioyon (God mondono)	,		
	Date 11/06/2023	Full name of contributor out-of-state PAC (ID#: BOWLING, ALLY Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Dringing	ODESSA, TX 79762	Faralousy (Coolingtoustings)			
	Principal occu PROPERTY	pation / Job title (See Instructions) MGMT	Employer (See Instructions)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_ BROWN, JET Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		GARDENDALE, TX 79758				
	Principal occu MANAGER	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_ Brown, SHELLY Contributor address; City; State; Zip Code GARDENDALE, TX 79758			Amount of Contribution (\$)	\$100.00
	Principal occu BDD	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/18/2023	Full name of contributor out-of-state PAC (ID#:_ Bryson, Christi Contributor address; City; State; Zip Code Odessa, TX 79762)		Amount of Contribution (\$)	\$100.00
	Principal occu Adult Probat	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/17 Rpt: 5/37	
2	FILER NAME Ector County	y Republican Women's Club		3	Filer ID (Ethics Commissio 00016322	n Filers)
4	Date 08/24/2023	5 Full name of contributor out-of-state PAC (ID#:_ CANSINO, JANE 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$20.00
_		LUBBOCK, TX 79407				
8	RETIRED	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/01/2023	Full name of contributor			Amount of Contribution (\$)	\$35.00
	Dein sin al a ser	ODESSA, TX 79764	Faralassa (Caralasta structura)			
		pation / Job title (See Instructions) PEACE JUDGE PCT 1	Employer (See Instructions)		
	Date 11/15/2023	Full name of contributor out-of-state PAC (ID#:_ Calloway, Judy (Mrs.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Odessa, TX 79761				
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/23/2023	Full name of contributor out-of-state PAC (ID#:_Calloway, Judy (Mrs.) Contributor address; City; State; Zip Code Odessa, TX 79761			Amount of Contribution (\$)	\$130.00
	Principal occur retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/23/2023	Full name of contributor out-of-state PAC (ID#:_ Darville, Mark (Mr.) Contributor address; City; State; Zip Code Odessa, TX 79798			Amount of Contribution (\$)	\$100.00
	Principal occu business ow	pation / Job title (See Instructions) rner	Employer (See Instructions Darville Co)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/17 Rpt: 6/37	
2	FILER NAME Ector County	y Republican Women's Club		3	Filer ID (Ethics Commission 00016322	n Filers)
4	Date 11/30/2023	5 Full name of contributor out-of-state PAC (ID#:_ Dawson, Lori (Mrs.) 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00
_	Deignaignal annu	Midland, TX 79702	In Frankrick (Contractive State			
8	Interior Desi	pation / Job title (See Instructions) gner	9 Employer (See Instructions) Self employed)		
	Date 08/24/2023	Full name of contributor out-of-state PAC (ID#:_ Duncan, Kellye Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00
		San Angelo, TX 76904				
	Retired	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/21/2023	Full name of contributor out-of-state PAC (ID#:_ Dunn, Thana Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Odessa, TX 79761				
	Principal occu Retired	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/14/2023	Full name of contributor out-of-state PAC (ID#:_ Dunn, Wallace (Mr.) Contributor address; City; State; Zip Code Odessa, TX 79762			Amount of Contribution (\$)	\$100.00
	Principal occu Sales	pation / Job title (See Instructions)	Employer (See Instructions Self Employed)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_ERVIN, TOMMY Contributor address; City; State; Zip Code ODESSA, TX 79763			Amount of Contribution (\$)	\$40.00
	Principal occu SEMI-RETIF	ipation / Job title (See Instructions) RED	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/17 Rpt: 7/37	
2	FILER NAME Ector County	y Republican Women's Club		3	Filer ID (Ethics Commission 00016322	n Filers)
4	Date 12/13/2023	5 Full name of contributor out-of-state PAC (ID#:_ Edgmom, Theresa (Mrs.) 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00
_	Deignaignal annu	Odessa, TX 79765	O Franklause (Coo la structions			
8	Insurance A	i i i i i i i i i i i i i i i i i i i	9 Employer (See Instructions) Higginbottan Edgmon In			
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_ Edgmom, Tim (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu	Odessa, TX 79765 pation / Job title (See Instructions)	Employer (See Instructions			
	Insurance A		Higginbottan Edgmon In			
	Date 12/18/2023	Full name of contributor out-of-state PAC (ID#:_ GARZA, JANE Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$40.00
		ODESSA, TX 79762				
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/18/2023	Full name of contributor out-of-state PAC (ID#:_GARZA, OT Contributor address; City; State; Zip Code ODESSA, TX 79762			Amount of Contribution (\$)	\$40.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/06/2023	Full name of contributor out-of-state PAC (ID#:_ Gregston, Traci (Ms.) Contributor address; City; State; Zip Code ODESSA, TX 79761-0000			Amount of Contribution (\$)	\$100.00
	Principal occu Barber	pation / Job title (See Instructions)	Employer (See Instructions)		
		·				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/17 Rpt: 8/37	
2	FILER NAME Ector County	y Republican Women's Club		3	Filer ID (Ethics Commission 00016322	n Filers)
4	Date 08/23/2023	5 Full name of contributor out-of-state PAC (ID#:_ Grimes, Heather 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$365.00
L		Odessa, TX 79765				
8	Accountant	pation / Job title (See Instructions)	9 Employer (See Instructions self employed	·)		
	Date 12/18/2023	Full name of contributor out-of-state PAC (ID#:_ Grimes, Heather (Mrs.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Deliverie et e e e e	Odessa, TX 79768	Faralassa (Caralastastica)	Ĺ		
	Accountant	pation / Job title (See Instructions)	Employer (See Instructions Self-employed	5)		
	Date 12/05/2023	Full name of contributor out-of-state PAC (ID#:_ HANKINS, KEN Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
		MIDLAND, TX 79705				
	Principal occu REP. SPAR	pation / Job title (See Instructions) KS	Employer (See Instructions	i)		
	Date 12/18/2023	Full name of contributor out-of-state PAC (ID#:_HAYS, DWAYNE Contributor address; City; State; Zip Code ODESSA, TX 79764			Amount of Contribution (\$)	\$40.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_ HENDERSON, ELIZABETH Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00
	Principal occu GRANT WR	pation / Job title (See Instructions) ITER	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	■ A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/17 Rpt: 9/37	
2	FILER NAME Ector County	y Republican Women's Club		3	Filer ID (Ethics Commission 00016322	Filers)
4	Date 12/13/2023	5 Full name of contributor out-of-state PAC (ID#:_ HENDERSON, JOHN 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$40.00
0	Principal occu	ODESSA, TX 79762 pation / Job title (See Instructions)	9 Employer (See Instructions			
8	ATTORNEY		9 Employer (See Instructions)		
	Date 11/22/2023	Full name of contributor out-of-state PAC (ID#:_ HERNANDEZ, KLATA Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$35.00
	Dringing occu	ODESSA, TX 79762	Employer (See Instructions			
	ACCOUNT I	pation / Job title (See Instructions) MGR	Employer (See Instructions)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_ HICKS, RHONDA Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$40.00
		ODESSA, TX 79762				
	Principal occu ACCOUNT I	pation / Job title (See Instructions) MGR	Employer (See Instructions)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_HOGGARD, STEPHANIE Contributor address; City; State; Zip Code ODESSA, TX 79762			Amount of Contribution (\$)	\$40.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_ Harrison, Danora (Mrs.) Contributor address; City; State; Zip Code Gardendale, TX 79758)		Amount of Contribution (\$)	\$40.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this forn	1.	1	Total pages Schedule A1: Sch: 7/17 Rpt: 10/37	
2	FILER NAME Ector County	Republican Women's Club			3	Filer ID (Ethics Commission 00016322	n Filers)
4	Date 12/18/2023	Hays, Debi (Judge)	out-of-state PAC (ID#: Zip Code)	7	Amount of Contribution (\$)	\$100.00
8	Drincinal occur	Odessa, TX 79764-1203 pation / Job title (See Instructions)	l _o	Employer (See Instructions			
0	County Judg			Ector County	,		
	Date 12/13/2023	Full name of contributor Hendricks, Brooke (Ms.) Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$40.00
		ODESSA, TX 79762					
	Principal occur Attorney	pation / Job title (See Instructions)		Employer (See Instructions Ector Co DA Office)		
	Date 12/18/2023	Full name of contributor Hurt, JOE (Mr.) Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
		midland, TX 79711					
	Principal occur Self employe	pation / Job title (See Instructions) rd		Employer (See Instructions Owner PBP Fabrication)		
	Date 12/18/2023	Full name of contributor Hurt, Sherry (Mrs.) Contributor address; City; State; Midland, TX 79711				Amount of Contribution (\$)	\$100.00
	Principal occu homemaker	pation / Job title (See Instructions)		Employer (See Instructions none)		
	Date 11/30/2023	Full name of contributor JOHNSON, REBECCA Contributor address; City; State; ODESSA, TX 79764	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$35.00
	Principal occu RETIRED	pation / Job title (See Instructions)		Employer (See Instructions)		
			'				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/17 Rpt: 11/37	
2	FILER NAME Ector County	Republican Women's Club		3	Filer ID (Ethics Commission 00016322	n Filers)
4	Date 12/13/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$40.00
_	Dringing Loon	ODESSA, TX 79761	O Employer (Coo Instructions			
8	ACCT MGR	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 12/18/2023	Full name of contributor out-of-state PAC (ID#:_ Jones, Sheryl (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Odessa, TX 79762 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	')		
	Date 12/18/2023	Full name of contributor out-of-state PAC (ID#:_KELM, DEREK Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$40.00
		ODESSA, TX 79762				
	Principal occu LANDSCAPI	pation / Job title (See Instructions) ER	Employer (See Instructions	i)		
	Date 11/24/2023	Full name of contributor out-of-state PAC (ID#: KEMP, JACLYN Contributor address; City; State; Zip Code ODESSA, TX 79762			Amount of Contribution (\$)	\$100.00
	Principal occu OFFICE MG	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/18/2023	Full name of contributor out-of-state PAC (ID#:_KRUGER, EDNA Contributor address; City; State; Zip Code ODESSA, TX 79762)		Amount of Contribution (\$)	\$100.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/17 Rpt: 12/37	
2	FILER NAME Ector County	y Republican Women's Club		3	Filer ID (Ethics Commission 00016322	n Filers)
4	Date 12/18/2023	 5 Full name of contributor out-of-state PAC (ID#:_Kelm, Donna (Mrs.) 6 Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00
_	Daine in all a con-	Odessa, TX 79762				
8	Accountant	pation / Job title (See Instructions)	Employer (See Instructions Self Employed)		
	Date 11/15/2023	Full name of contributor out-of-state PAC (ID#:_ Kimbrell, Pam (Mrs.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Dringing! goog	ODESSA, TX 79762	Employer (Co.) Instructions			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/06/2023	Full name of contributor out-of-state PAC (ID#:_ LACY, RHONDA Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
		MIDLAND, TX 79705				
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_ LEE, JIMMY Contributor address; City; State; Zip Code ODESSA, TX 79762			Amount of Contribution (\$)	\$40.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_LEE, YOULANDA Contributor address; City; State; Zip Code ODESSA, TX 79762			Amount of Contribution (\$)	\$100.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/17 Rpt: 13/37	
2	FILER NAME Ector County	y Republican Women's Club		3	Filer ID (Ethics Commission 00016322	n Filers)
4	Date 12/13/2023	5 Full name of contributor out-of-state PAC (ID#:_ LEWIS, ANN 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00
_	Dringing Local	ODESSA, TX 79762	Continue (See Instructions			
8	VOLUNTEE	pation / Job title (See Instructions) R	9 Employer (See Instructions)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_ LEWIS, RONNIE Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	5	ODESSA, TX 79762	1 5 1 70 1 1			
	RANCHER	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/18/2023	Full name of contributor out-of-state PAC (ID#:_ LEWIS, TRYON (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		ODESSA, TX 79763				
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions Law Firm Partner)		
	Date 12/18/2023	Full name of contributor out-of-state PAC (ID#:_Landgraf, Beverly (Mrs.) Contributor address; City; State; Zip Code Odessa, TX 79761-3429			Amount of Contribution (\$)	\$100.00
	Principal occu Rancher	pation / Job title (See Instructions)	Employer (See Instructions self employed)		
	Date 12/18/2023	Full name of contributor out-of-state PAC (ID#:_Landgraf, John (Mr.) Contributor address; City; State; Zip Code Odessa, TX 79761-3429			Amount of Contribution (\$)	\$100.00
	Principal occu Rancher	pation / Job title (See Instructions)	Employer (See Instructions self employed)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 11/17 Rpt: 14/37	
2	FILER NAME Ector Count	y Republican Women's Club		3	Filer ID (Ethics Commission 00016322	n Filers)
4	Date 08/24/2023	5 Full name of contributor out-of-state PAC (ID Landgraf, Shelby (Mrs.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00
		Odessa, TX 79762	<u>-</u>			
8	Principal occur retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 12/18/2023	Full name of contributor out-of-state PAC (ID Lewis, Trudy (Mrs.) Contributor address; City; State; Zip Code	#:)	•	Amount of Contribution (\$)	\$100.00
	Deinsingles	Odessa, TX 79763	Freelesses (October Antonoxico			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID Lively, Melanie Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$500.00
		Odessa, TX 79765				
		pation / Job title (See Instructions) r Medical Practice	Employer (See Instructions Dr Charles Lively	s)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID Lucas , Martha (Mrs.) Contributor address; City; State; Zip Code	#:)	•	Amount of Contribution (\$)	\$100.00
		Odessa, TX 79761	_			
	Principal occu Nurse / Prof	pation / Job title (See Instructions) essor	Employer (See Instructions Midland College	s)		
	Date 12/04/2023	Full name of contributor out-of-state PAC (ID MCWILLIAMS, DANA Contributor address; City; State; Zip Code ODESSA, TX 79762	#:)		Amount of Contribution (\$)	\$35.00
	Principal occu HR DIRECT	pation / Job title (See Instructions)	Employer (See Instructions	<u>1</u> S)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/17 Rpt: 15/37	
2	FILER NAME Ector County	y Republican Women's Club		3	Filer ID (Ethics Commission 00016322	n Filers)
4	Date 12/01/2023	5 Full name of contributor out-of-state PAC (ID#:_ McKee, Diann (Mrs.) 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Odessa, TX 79762 pation / Job title (See Instructions)	9 Employer (See Instructions			
•	Business Ov		Employer (See Instructions)		
	Date 12/01/2023	Full name of contributor out-of-state PAC (ID#:_McKee, John Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	Odessa, TX 79762 pation / Job title (See Instructions)	Employer (See Instructions)		
	Retired	pation 7 oos tale (eee motidotone)	Employer (Gee meadeache	,		
	Date 12/18/2023	Full name of contributor out-of-state PAC (ID#:_ McNeil, Cheyenne (Mrs.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$40.00
		Odessa, TX 79765				
	Principal occu Housewife	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/05/2023	Full name of contributor out-of-state PAC (ID#:_Miller, Jill (Mrs.) Contributor address; City; State; Zip Code Odessa, TX 79765)		Amount of Contribution (\$)	\$100.00
	Principal occu Director	pation / Job title (See Instructions)	Employer (See Instructions Odessa Housing FINAN		:	
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_Minor, Rachel (Ms.) Contributor address; City; State; Zip Code Odessa, TX 79765)		Amount of Contribution (\$)	\$100.00
	Principal occu Project Mana	ipation / Job title (See Instructions) ager	Employer (See Instructions First Tier Construction)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/17 Rpt: 16/37	
2	FILER NAME Ector County	y Republican Women's Club		3	Filer ID (Ethics Commission 00016322	n Filers)
4	Date 12/13/2023	5 Full name of contributor out-of-state PAC (ID#:_ Morris, Cassandra (Mrs.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$40.00
_		Odessa, TX 79762				
8	Principal occu Teacher	ipation / Job title (See Instructions)	9 Employer (See Instructions ECISD)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_Nabarrette, Jaye (Mrs.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Odessa, TX 79762 upation / Job title (See Instructions)	Employer (See Instructions)		
	Administativ		Wood Foundation	,		
	Date 12/22/2023	Full name of contributor out-of-state PAC (ID#:_ Norman, Brenda (Mrs.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Odessa, TX 79762				
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_ Nyborg, Williams (Mr.) Contributor address; City; State; Zip Code Odessa, TX 79765			Amount of Contribution (\$)	\$100.00
	Principal occu Business Ov	pation / Job title (See Instructions) wner	Employer (See Instructions Self Employed)		
	Date 12/05/2023	Full name of contributor out-of-state PAC (ID#:_ Primeaux, Irma (Ms.) Contributor address; City; State; Zip Code ODESSA, TX 79761-0000			Amount of Contribution (\$)	\$100.00
	Principal occu Hairdresser	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/17 Rpt: 17/37	
2	FILER NAME Ector County	y Republican Women's Club		3	Filer ID (Ethics Commission 00016322	n Filers)
4	Date 11/30/2023	5 Full name of contributor out-of-state PAC (ID#:_ Rhodes, Betsy (Mrs.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00
_		Odessa, TX 79762				
8	Principal occu Treasurer	pation / Job title (See Instructions)	9 Employer (See Instructions Metal Specialties Inc)		
	Date 11/06/2023	Full name of contributor out-of-state PAC (ID#:_Scott, Linda (Mrs.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Dein sin al a sau	Gardendale, TX 79758	Faralassa (Caralassa trastica)			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/14/2023	Full name of contributor out-of-state PAC (ID#:_ Shrode, John (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$35.00
		Odessa, TX 79761				
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self Employed)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_Smith, Margie (Mrs.) Contributor address; City; State; Zip Code Odessa, TX 79761			Amount of Contribution (\$)	\$40.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_Smith, Walter (Mr.) Contributor address; City; State; Zip Code Odessa, TX 79761			Amount of Contribution (\$)	\$40.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this 1	orm.	1	Total pages Schedule A1: Sch: 15/17 Rpt: 18/37	
2	FILER NAME Ector County	Republican Women's Club		3	Filer ID (Ethics Commission 00016322	n Filers)
4	Date 12/05/2023			7	Amount of Contribution (\$)	\$20.00
		Midland, TX 79705				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 12/05/2023	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
	Principal occu	Midland, TX 79705 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		ner/Politician	, , ,			
	Date 08/23/2023	Full name of contributor out-of-state PAC (ID#:_Spiers, Jon (Dr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$60.00
		Houston, TX 77005				
	Principal occu Doctor	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_ Stringer, Don (Mrs.) Contributor address; City; State; Zip Code Odessa, TX 79761			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_Stringer, Shawn (Mrs.) Contributor address; City; State; Zip Code Odessa, TX 79761)		Amount of Contribution (\$)	\$100.00
	Principal occu Housewife	pation / Job title (See Instructions)	Employer (See Instructions)		
			,			

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/17 Rpt: 19/37	
2	FILER NAME Ector County	/ Republican Women's Club		3	Filer ID (Ethics Commission 00016322	n Filers)
4	Date 08/23/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$90.00
_	<u> </u>	ODESSA, TX 79763				
8	Principal occu RETIRED	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/14/2023	Full name of contributor out-of-state PAC (ID#:_WARD, AMY Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Deireire I e e e	ODESSA, TX 79762	Franks on (Cook lastructions			
	CFO	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2023	Full name of contributor)		Amount of Contribution (\$)	\$40.00
		ODESSA, TX 79763				
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/18/2023	Full name of contributor)		Amount of Contribution (\$)	\$40.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2023	Full name of contributor out-of-state PAC (ID#:_ Whitefield, Kay (Mrs.) Contributor address; City; State; Zip Code Odessa, TX 79765			Amount of Contribution (\$)	\$35.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
		•				

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 17/17 Rpt: 20/37	
2	FILER NAME Ector County	/ Republican Women's Club		3	Filer ID (Ethics Commission 00016322	ı Filers)
4	Date 12/18/2023			7	Amount of Contribution (\$)	\$40.00
_		Midland, TX 79707				
8	Principal occu retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 12/18/2023	Full name of contributor out-of-state PAC (ID#:_ Wise, Kathryn (Mrs.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$40.00
	Principal occu	Midland, TX 79707	Employer (See Instructions			
	retired	pation / Job title (See Instructions)	Employer (See Instructions	')		
	Date 12/07/2023	Full name of contributor out-of-state PAC (ID#: Woodall, Jennifer (Mrs.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$35.00
		Odessa, TX 79764				
	Principal occu Administration	pation / Job title (See Instructions) on	Employer (See Instructions	5)		
	Date 11/06/2023	Full name of contributor out-of-state PAC (ID#:_YOST, WHITNEY Contributor address; City; State; Zip Code ODESSA, TX 79764			Amount of Contribution (\$)	\$35.00
	Principal occu OFFICE MG	pation / Job title (See Instructions)	Employer (See Instructions	5)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/4 Rpt: 21/37		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
Ector Count	y Republican Women's Club		00016322		
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution		
08/22/2023	AMONETT, ASHLEIGH		contribution (\$) description		
	7 Contributor address; City; State; Zip Code		\$100.00 DESIGNER DECORATED ! CAKE CERTIFICATE		
	ODE004 TV 70700		_		
40 Deireirelese	ODESSA, TX 79762	44 F	Check if travel outside of Texas. Complete Schedule T.		
	upation / Job title (FOR NON-JUDICIAL) (See instructions) FEX. DIRECTOR	11 Employer (FOR NON	-JUDICIAL) (See instructions)		
	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)		
12 Continuators	principal occupation (FOR JODICIAL)	Continuator 5 job title	(FOR JUDICIAL) (See instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
	ompreyerran (i ex ee2.e2)		0 0,00000 (0) (0002.0		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
	, , , , , , , , , , , , , , , , , , , ,				
Date	Full name of contributor out-of-state PAC (ID#:	\	Amount of In-kind contribution		
08/22/2023	BRITTON & CO)	contribution (\$) description		
	Contributor address; City; State; Zip Code		\$160.00 JOICO PRODUCT BAG		
	Contributor address, Oity, State, 21p Code				
	ODESSA, TX 79762		Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	r's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description		
08/22/2023	Burrola, Luis Jr, (Mr.)		\$230.00 I TRAVEL CASE		
	Contributor address; City; State; Zip Code		HUMIDOR		
	Odessa, TX 79764		Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON			
Draftsman	,	self employed	,		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 2/4 Rpt: 22/37			
2 FILER NAME Ector Count	y Republican Women's Club	3 Filer ID (Ethics Commission Filers) 00016322				
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$			
5 Date 09/19/2023	7 Contributor address; City; State; Zip Code)	8 Amount of contribution (\$) In-kind contribution description \$75.00 LEATHER CONCEALED HANDGUN PURSE			
40.00	Odessa, TX 79761	T4.5 / (505.110)	Check if travel outside of Texas. Complete Schedule T.			
retired	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-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 contribute	or's spouse (if any) (FOR JUDICIAL)			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 09/19/2023	Full name of contributor out-of-state PAC (ID#: Calloway, Judy (Mrs.) Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$80.00 MARGARITA BASKET			
	Odessa, TX 79761		I I Check if travel outside of Texas. Complete Schedule T.			
Principal occu retired	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 09/20/2023	Full name of contributor out-of-state PAC (ID#: Cronk, Carolyn Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$150.00 MERLE NORMAN COSMETICS			
	Odessa, TX 79765		Check if travel outside of Texas. Complete Schedule T.			
Principal occu Cosmetics (upation / Job title (FOR NON-JUDICIAL) (See instructions) Owner	Employer (FOR NON Merle Norman	I-JUDICIAL) (See instructions)			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
If contributor	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A2: Sch: 3/4 Rpt: 23/37			
2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Ector Count	y Republican Women's Club		00016322			
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$			
5 Date	6 Full name of contributor ut-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution			
10/03/2023	Edgmom, Theresa (Mrs.)		contribution (\$) description \$100.00 DOOR HANGER			
	7 Contributor address; City; State; Zip Code					
			į į			
	Odessa, TX 79765		Cheal, if traval autoide of Tayon, Complete Cabadula T			
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. I-JUDICIAL) (See instructions)			
Insurance A		Higginbottan Edgm	,			
	principal occupation (FOR JUDICIAL)	13 Contributor's job title				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of In-kind contribution			
08/23/2023	Kelm, Donna (Mrs.)		contribution (\$) description \$75.00 FALL WREATH			
	Contributor address; City; State; Zip Code		The state of the s			
			į į			
	Odessa, TX 79762		l 🗖 i			
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. J-JUDICIAL) (See instructions)			
Accountant	,	Self Employed	,			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of In-kind contribution			
09/20/2023	RHODES, MARCY (Mrs.)		contribution (\$) description \$50.00 SCENTSY WARMER			
	Contributor address; City; State; Zip Code		AND 2 MELTS			
			į į			
	ANDREWS, TX 79714		_ ;			
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. J-JUDICIAL) (See instructions)			
l '	ENT SCENTSY CONSULTANT	Employer (FOR NOR	(dobien, L)			
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)			
	,					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
If contributor	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 4/4 Rpt: 24/37 3 Filer ID (Ethics Commission Filers) FILER NAME Ector County Republican Women's Club 00016322 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 08/22/2023 Riley, Nancy (Mrs.) \$25.00 I BOOK 7 Contributor address; City; State; Zip Code Odessa, TX 79761 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) Retired 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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) In-kind contribution Date Full name of contributor Amount of out-of-state PAC (ID#: contribution (\$) description 08/01/2023 Smith, Margie (Mrs.) \$50.00 MARY KAY PRODUCTS Contributor address; City; State; Zip Code Odessa, TX 79761 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

	The Instruction Guide explains how t	o complete this form.
1 Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/13 Rpt:	Ector County Republican Women's Club	00016322
4 Date	5 Payee name	
07/01/2023	Armic Systems	
6 Amount (\$)	7 Payee Address; City; State; Zip	
129.00	3405 Clearmont Ave	
Expenditure from corporate funds	Odessa, TX 79762	
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories	,
OF EXPENDITURE	Advertising Expense	WEBSITE MANAGEMENT - MONTHLY
Date	Payee name	l
08/01/2023	Armic Systems	
Amount (\$)	Payee Address; City; State; Zip	
129.00	3405 Clearmont Ave	
Expenditure from		
corporate funds	Odessa, TX 79762	_
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories	
EXPENDITURE	Advertising Expense	WEBSITE MANAGEMENT - MONTHLY
Date	Payee name	
09/01/2023	Armic Systems	
Amount (\$)	Payee Address; City; State; Zip	
129.00	3405 Clearmont Ave	
Expenditure from	Odana TV 70702	
corporate funds	Odessa, TX 79762	la)
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories Advertising Expense	(See instructions regarding type of information required.) WEBSITE MANAGEMENT - MONTHLY
EXPENDITURE	Advertising Expense	WEBSITE MANAGEMENT - MONTALY
Date	Payee name	
10/01/2023	Armic Systems	
Amount (\$)	Payee Address; City; State; Zip	
129.00	3405 Clearmont Ave	
Expenditure from	0.1	
corporate funds	Odessa, TX 79762	Tax .
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories Advertising Expense	(b) Description (See instructions regarding type of information required.) WEBSITE MANAGEMENT - MONTHLY
EXPENDITURE	Advertising Expense	WEBSITE MANAGEMENT - MONTHLY
	1	-

	The Instruction Guide explains how to complete this form.
1 Total pages Schedule I: Sch: 2/13 Rpt:	2 FILER NAME Sctor County Republican Women's Club 3 Filer ID (Ethics Commission Filers) 00016322
4 Date	5 Payee name
11/01/2023	Armic Systems
6 Amount (\$)	7 Payee Address; City; State; Zip
129.00	3405 Clearmont Ave
Expenditure from corporate funds	Odessa, TX 79762
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Advertising Expense WEBSITE MANAGEMENT - MONTHLY
EXI ENDITORE	
Date	Payee name
12/01/2023	Armic Systems
Amount (\$)	Payee Address; City; State; Zip
129.00	3405 Clearmont Ave
Expenditure from	0.1
corporate funds	Odessa, TX 79762
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Advertising Expense (b) Description (See instructions regarding type of information required.) WEBSITE MGMT
EXPENDITURE	Advertising Expense WEBSITE MGMT
Date	Payee name
07/17/2023	Calloway, Judy (Mrs.)
Amount (\$)	Payee Address; City; State; Zip
18.94	1305 Bonham
Expenditure from	TV 70704
corporate funds	odessa, TX 79761
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense (b) Description (See instructions regarding type of information required.) SNACKS FOR MEETING
EXPENDITURE	SNACKS FOR MEETING
Date	Payee name
07/17/2023	Calloway, Judy (Mrs.)
Amount (\$)	Payee Address; City; State; Zip
7.50	1305 Bonham
Expenditure from	
corporate funds	odessa, TX 79761
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
EXPENDITURE	Food/Beverage Expense SNACKS FOR MEETING

	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/13 Rpt:	Ector County Republican Women's Club	00016322
4 Date	5 Payee name	
07/17/2023	Calloway, Judy (Mrs.)	
6 Amount (\$)	7 Payee Address; City; State; Zip	
34.36	1305 Bonham	
Expenditure from		
corporate funds	odessa, TX 79761	Terr
8 PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) SNACKS FOR MEETING
EXPENDITURE	1 Journal of the Property of t	SNACKS FOR MEETING
Date	Payee name	
07/17/2023	Calloway, Judy (Mrs.)	
Amount (\$)	Payee Address; City; State; Zip	
75.00	1305 Bonham	
Expenditure from		
corporate funds	odessa, TX 79761	
PURPOSE OF		(b) Description (See instructions regarding type of information required.)
EXPENDITURE	Fees	3RD QTR BOARD OF DIRECTORS MEETING REGISTRATION
		REGITATION
Date	Payee name	
10/19/2023	Calloway, Judy (Mrs.)	
Amount (\$)	Payee Address; City; State; Zip	
100.00	1305 Bonham	
Expenditure from		
corporate funds	odessa, TX 79761	
PURPOSE		(b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Fees	REIMBURSE TFRW FEE
Date	Payee name	
07/17/2023	Calloway, Judy (Mrs.)	
Amount (\$)	Payee Address; City; State; Zip	
2.12	1305 Bonham	
Expenditure from		
corporate funds	odessa, TX 79761	
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	
OF EXPENDITURE	Fees	CC FEES

	The Instruction Guide explains how to complete this form.
1 Total pages Schedule I: Sch: 4/13 Rpt:	2 FILER NAME Sctor County Republican Women's Club 3 Filer ID (Ethics Commission Filers) 00016322
4 Date 09/26/2023	5 Payee name Edgmon, Theresa (Mrs.)
6 Amount (\$) 175.16 Expenditure from	7 Payee Address; City; State; Zip 6 San Marcos
corporate funds 8 PURPOSE OF EXPENDITURE	Odessa, TX 79765 (a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense (b) Description (See instructions regarding type of information required.) REIMBURSE DOLLAR TREE & HOBBY LOBBY FOR 1ST RESPONDERS BASKETS
Date 10/19/2023	Payee name GRIMES, HEATHER (Mrs.)
Amount (\$) 100.00 Expenditure from corporate funds	Payee Address; City; State; Zip 50 COBBLESTONE LN ODESSA, TX 79765
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required.) REIMBURSE TFRW FEE
Date 10/23/2023	Payee name Hays, Debi (Mrs.)
Amount (\$) 100.00 Expenditure from corporate funds	Payee Address; City; State; Zip 9205 Bedford Odessa, TX 79764
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required.) REIMBURSE TFRW FEE
Date 09/24/2023	Payee name Kelm, Donna (Mrs.)
Amount (\$) 1,522.02 Expenditure from	Payee Address; City; State; Zip 25 Kingsland Court Odessa, TX 79762
Corporate funds PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense (b) Description (See instructions regarding type of information required.) REIMBURSE SAM'S GOODS FOR 1ST RESPONDERS BASKETS

	The Instruction Guide explains how to complete this form.
Total pages Schedule I: Sch: 5/13 Rpt:	2 FILER NAME Ector County Republican Women's Club 3 Filer ID (Ethics Commission Filers) 00016322
4 Date 09/28/2023	5 Payee name Kelm, Donna (Mrs.)
6 Amount (\$) 72.00	7 Payee Address; City; State; Zip 25 Kingsland Court
Expenditure from corporate funds	Odessa, TX 79762
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense (b) Description (See instructions regarding type of information required.) REIMBURSE MEALS FOR NFRW CONVENTION
Date 09/28/2023	Payee name Kelm, Donna (Mrs.)
Amount (\$) 813.29 Expenditure from corporate funds	Payee Address; City; State; Zip 25 Kingsland Court Odessa, TX 79762
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel In District (b) Description (See instructions regarding type of information required.) REIMBURSE TRAVEL FOR NFRW CONVENTION
Date 10/14/2023	Payee name Kelm, Donna (Mrs.)
Amount (\$)	Payee Address; City; State; Zip
444.75	25 Kingsland Court
Expenditure from corporate funds	Odessa, TX 79762
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel In District (b) Description (See instructions regarding type of information required.) REIMBURSE TRAVEL FOR TFRW
Date 10/30/2023	Payee name MARRIOTT HOTEL & CONFERENCE CENTER
Amount (\$)	Payee Address; City; State; Zip
343.85	305 E. 5TH
Expenditure from corporate funds	ODESSA, TX 79761
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel In District (b) Description (See instructions regarding type of information required.) DAVID LUTHER

	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 6/13 Rpt:	Ector County Republican Women's Club	00016322
4 Date	5 Payee name	
11/14/2023	MARRIOTT HOTEL & CONFERENCE CENTE	R
6 Amount (\$)	7 Payee Address; City; State; Zip	
243.68	305 E. 5TH	
Expenditure from corporate funds	ODESSA, TX 79761	
8 PURPOSE		(b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Food/Beverage Expense	MEALS
Date	Payee name	
12/13/2023	MCM Elegante	
Amount (\$)	Payee Address; City; State; Zip	
2,376.67	5200 E. University	
Expenditure from	Odeses TV 70702	
corporate funds	Odessa, TX 79762	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) 2023 CHRISTMAS PARTY
EXPENDITURE	Event Expense	2023 CHRISTIMAS PARTT
Date	Payee name	
10/19/2023	MORRIS, CASSANDRA	
Amount (\$)	Payee Address; City; State; Zip	
100.00	1311 E 49TH	
Expenditure from	ODESCA TV 70762	
corporate funds	ODESSA, TX 79762	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) REIMBURSE TFRW FEE
EXPENDITURE	. 555	KEIMBORGE IT KW T EE
Date	Payee name	
12/31/2023	Odessa Country Club	
Amount (\$)	Payee Address; City; State; Zip	
892.70	7293 Club Dr	
Expenditure from	0.4 TV 7070F	
corporate funds	Odessa, TX 79765	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) MEALS
EXPENDITURE	1 ood/Deverage Expense	WEALS

	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule I: Sch: 7/13 Rpt:	2 FILER NAME Ector County Republican Women's Club	3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/25/2023	5 Payee name PINMART INC.	•
6 Amount (\$) 119.50	7 Payee Address; City; State; Zip 180 MARTIN LN	
Expenditure from corporate funds	ELK GROVE VILLAGE, IL 60007	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) NFRW CONVENTION PINS	D) Description (See instructions regarding type of information required.) PINS FOR NFRW CONVENTION
Date 07/21/2023	Payee name Quickbooks/Intuit Inc	
Amount (\$) 58.63 Expenditure from	Payee Address; City; State; Zip 2700 Coast Ave	
corporate funds	Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (be Accounting/Banking	Description (See instructions regarding type of information required.) MONTHLY QB FEES
Date 08/21/2023	Payee name Quickbooks/Intuit Inc	
Amount (\$) 63.96	Payee Address; City; State; Zip 2700 Coast Ave	
Expenditure from corporate funds	Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Accounting/Banking	D) Description (See instructions regarding type of information required.) MONTHLY QB FEES
Date 09/21/2023	Payee name Quickbooks/Intuit Inc	
Amount (\$) 63.96 Expenditure from corporate funds	Payee Address; City; State; Zip 2700 Coast Ave Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Accounting/Banking	Description (See instructions regarding type of information required.) MONTHLY QB FEES

	The Instruction Guide explains how to complete this form.
1 Total pages Schedule I:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/13 Rpt:	Ector County Republican Women's Club 00016322
4 Date	5 Payee name
10/21/2023	Quickbooks/Intuit Inc
6 Amount (\$)	7 Payee Address; City; State; Zip
63.96	2700 Coast Ave
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Accounting/Banking MONTHLY QB FEES
Date	Payee name
11/21/2023	Quickbooks/Intuit Inc
Amount (\$)	Payee Address; City; State; Zip
63.96	2700 Coast Ave
Expenditure from	
corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Accounting/Banking MONTHLY QB FEES
Date	Payee name
12/21/2023	Quickbooks/Intuit Inc
Amount (\$)	Payee Address; City; State; Zip
63.96	2700 Coast Ave
Expenditure from	
corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Accounting/Banking MONTHLY QB FEES
Date	Payee name
07/17/2023	ROSA'S CAFE
Amount (\$)	Payee Address; City; State; Zip
46.72	4945 E 42ND
Expenditure from	
corporate funds	ODESSA, TX 79762
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Food/Beverage Expense MEAL FOR MEETING
EXI ENDITORE	

	The Instruction Guide explains how to complete this form.
1 Total pages Schedule I: Sch: 9/13 Rpt:	2 FILER NAME Ector County Republican Women's Club 3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/21/2023	5 Payee name Southwest Airlines
6 Amount (\$) 237.97 Expenditure from corporate funds	7 Payee Address; City; State; Zip PO BOX 36647 DALLAS, TX 75235
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel Out of District (b) Description (See instructions regarding type of information required.) NFRW CONVENTION
Date 08/21/2023	Payee name Southwest Airlines
Amount (\$) 237.97 Expenditure from corporate funds	Payee Address; City; State; Zip PO BOX 36647 DALLAS, TX 75235
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel In District (b) Description (See instructions regarding type of information required.) NFRW CONVENTION
Date 12/31/2023	Payee name Squareup.com
Amount (\$) 112.49 Expenditure from corporate funds	Payee Address; City; State; Zip 14500 FAA Blvd Suite 100 Ft Worth, TX 76155
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description CC FEES (See instructions regarding type of information required.)
Date 11/01/2023	Payee name Squareup.com
Amount (\$) 10.92 Expenditure from corporate funds	Payee Address; City; State; Zip 14500 FAA Blvd Suite 100 Ft Worth, TX 76155
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required.) CC FEES

	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 10/13 Rpt:	Ector County Republican Women's Club	00016322
4 Date	5 Payee name	
08/15/2023	TFRW	
6 Amount (\$)	7 Payee Address; City; State; Zip	
525.00	13740 US-183 J4,	
Expenditure from corporate funds	Austin, TX 78750	
8 PURPOSE		(b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Fees	CLUB QTR PAGE AD
Date	Davido nama	
09/19/2023	Payee name TFRW	
Amount (\$)	Payee Address; City; State; Zip	
	13740 US-183 J4,	
100.00	10140 00 100 04,	
Expenditure from corporate funds	Austin, TX 78750	
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Fees	MEMBERSHIP SUBMISSION #5
EXPENDITURE		
Date	Payee name	
12/27/2023	TFRW	
Amount (\$)	Payee Address; City; State; Zip	
1,300.00	13740 US-183 J4,	
Expenditure from	A	
corporate funds	Austin, TX 78750	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) 2024 MEMBERSHIP SUBMISSION #1
EXPENDITURE	1 000	2024 MEMBERSHIF SOBMISSION #1
Date	Payee name	
12/27/2023	TFRW	
Amount (\$)	Payee Address; City; State; Zip	
20.00	13740 US-183 J4,	
Expenditure from		
corporate funds	Austin, TX 78750	
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	·
OF EXPENDITURE	Fees	2024 CLUB FEE
		1
		ł

	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule I: Sch: 11/13 Rpt:	2 FILER NAME Ector County Republican Women's Club	3 Filer ID (Ethics Commission Filers) 00016322
4 Date 12/27/2023	5 Payee name TFRW	
6 Amount (\$)	7 Payee Address; City; State; Zip	
0.20	13740 US-183 J4,	
Expenditure from corporate funds	Austin, TX 78750	
8 PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) 2024 CLUB FEE
EXPENDITURE	1 333	2024 01001 11
Date	Payee name	
07/01/2023	Textedly App	
Amount (\$)	Payee Address; City; State; Zip 349 Fifth Ave	
7.00	349 FIIIII AVE	
Expenditure from corporate funds	New York, NY 10016	
PURPOSE		(b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Advertising Expense	RECURRING PAYMENT
Date	Payee name	
08/01/2023	Textedly App	
Amount (\$)	Payee Address; City; State; Zip	
7.00	349 Fifth Ave	
Expenditure from corporate funds	New York, NY 10016	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.)
EXPENDITURE	Advertising Expense	RECURRING PAYMENT
Date	Payee name	
09/01/2023	Textedly App	
Amount (\$)	Payee Address; City; State; Zip	
7.00	349 Fifth Ave	
Expenditure from corporate funds	New York, NY 10016	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)	
EXPENDITURE	Advertising Expense	RECURRING PAYMENT
	,	
1		

	The Instruction Guide explains how to complete this form.
1 Total pages Schedule I:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 12/13 Rpt:	Ector County Republican Women's Club 00016322
4 Date	5 Payee name
10/01/2023	Textedly App
6 Amount (\$)	7 Payee Address; City; State; Zip
7.00	349 Fifth Ave
Expenditure from	
corporate funds	New York, NY 10016
8 PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
EXPENDITURE	Advertising Expense RECURRING PAYMENT
Date	Payee name
11/02/2023	Textedly App
Amount (\$)	Payee Address; City; State; Zip
	349 Fifth Ave
7.00	G-5 T Harry No.
Expenditure from corporate funds	New York, NY 10016
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Advertising Expense RECURRING PAYMENT
EXPENDITURE	
Date	Payee name
11/02/2023	Textedly App
Amount (\$)	Payee Address; City; State; Zip
600.00	349 Fifth Ave
Expenditure from	N. V. I. NIV. 40040
corporate funds	New York, NY 10016
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.) Advertising Expense RECURRING PAYMENT
EXPENDITURE	Advertising Expense RECORRING PAYMENT
Date	Payee name
12/01/2023	Textedly App
Amount (\$)	Payee Address; City; State; Zip
	349 Fifth Ave
7.00 Expenditure from	
corporate funds	New York, NY 10016
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Advertising Expense RECURRING PAYMENT

The Instruction Guide explains how to complete this form.						
Total pages Schedule I: Sch: 13/13 Rpt:	2 FILER NAME Ector County Republica	n Women's Club		3 Filer ID (E 00016322	Ethics Commission File	
Date 10/10/2023	5 Payee name WIX.COM					
Amount (\$) 311.76 Expenditure from	P O Box 40190	City; State; Zip				
corporate funds	San Francisco, CA 941		(n.)			
PURPOSE OF EXPENDITURE	(a) Category (See instructions for each Advertising Expense	campies of acceptable categories)	WIX FEES	(See instructions regarding	type of information require	