#### 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) 00085685 3 COMMITTEE NAME **OFFICE USE ONLY** Republican Women of Red River Valley Date Received **ELECTRONICALLY FILED** 01/31/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 1575 Date Hand-delivered or Date Postmarked Change of Address Paris, TX 75460 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Elizabeth NAME NICKNAME LAST **SUFFIX** Lumley-Maybin STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2150 Plum Street STREET **ADDRESS** (Residence or Business) Paris, TX 75460 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2150 Plum Street MAILING **ADDRESS** Paris, TX 75460 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (417) 247-9083 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) X **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2024 01/25/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/05/2024 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)			
Republican Women o	00085685						
14 COMMITTEE	1. Candidates	A. Supported					
ACTIVITY	(Identify by name or, if applicable, classify by party.)						
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	2. Measures	A. Supported					
	(Describe by date and location of election and nature of issue.)	7. Supported					
		B. Opposed					
	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	\$	488.00			
	2. TOTAL POLITICA  (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	488.00			
EXPENDITURE	`	D POLITICAL EXPENDITURES					
TOTALS			\$	0.00			
	4. TOTAL POLITICAL EXPENDITURES						
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTING	DAY \$	4,109.35				
OUTSTANDING LOAN TOTALS							
16 AFFIDAVIT							
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.					
		Flizabeth Lu	mley-Maybin				
		Signature of Car		er			
AFFIX NOTAR	Y STAMP / SEAL ABOVE	· ·					
Sworn to and subscribe	ad hefore me, by the said	, th	nic the	day			
of	. 20 . to certify	which, witness my hand and seal of office.		uay			
· ·							
Signature of officer a	administering oath	Printed name of officer administering oath	Title of office	er administering oath			

### **SUBTOTALS - GPAC**

# FORM GPAC COVER SHEET PG 3

				3 of 7
<b>17</b> CO	MMITTE	E NAME	18 Filer ID	(Ethics Commission Filers)
Rer	oublica	n Women of Red River Valley	00085685	,
		E SUBTOTALS		1
l		SCHEDULE		SUBTOTAL AMOUNT
INA	VIL OI V	SCHEDULL		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 488.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	Ш	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
		COUEDING CA. MONETARY CONTRIBUTIONS FROM CORPORATION OR LARG	ND.	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	JK	\$
5.	П	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	<b> </b> \$
		EADON GNOANIZATION		
6.	П	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
0.	<u> </u>		7 1.2	Φ
7		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR		
7.	Ш	ORGANIZATION		\$
8.	Ш	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 1,363.44
				_,,,,,,,
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		
11.	Ш	SCHEDOLE 12. ON AID INCOMMED OBLIGATIONS		\$
12.	Ш	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	JNS	\$
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	П	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
				·
15.	П	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	RETURNED	\$
	Ц	TO FILER		ļ <sup>ψ</sup>
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### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
Sch: 1/4 Rpt: 4/7	Republican Women of Red River Valley 00085685							
4 Date	5 Payee name							
01/18/2024	AMAZON							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$17.07	33333 LBJ FREEWAY							
Expenditure from corporate funds	DALLAS, TX 75241							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.							
	Check if Austin, TX, officeholder living expense  BALLON COLUMN							
	D'ALLON GOLOIVIIN							
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
expenditure to benefit C/Ol								
Date	Payee name							
01/10/2024	AMAZON							
Amount (\$)	Payee address; City; State; Zip Code							
\$21.30	7505 E. MARGINAL WAY S.							
Expenditure from corporate funds	SEATTLE, WA 98108							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF	Event Expense  Check if travel outside of Texas. Complete Schedule T.							
Check if Austin, TX, officeholder living expense								
	BALOON COLUMN							
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held							
Date	Payae name							
01/22/2024	Payee name RWRRV							
Amount (\$)	Payee address; City; State; Zip Code							
\$150.00	P.O. BOX 1573							
Ψ130.00	1.0.207.2070							
Expenditure from corporate funds	PARIS, TX 75460							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense							
	Event Expense							
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wangs/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_					
Sch: 2/4 Rpt: 5/7	Republican Women of Red River Valley 00085685						
4 Date	5 Payee name						
01/05/2024	Red River Valley Fair Association						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$75.00	570 E. Center St.						
Expenditure from	Davie TV 75400						
corporate funds	Paris, TX 75460						
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.						
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense						
	Bldg. Rental						
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held						
experialture to beliefit C/O							
Date	Payee name						
01/25/2024	TACO DELITE						
Amount (\$)	Payee address; City; State; Zip Code						
\$527.83	150 CLARKSVILLE						
Expenditure from corporate funds	PARIS, TX 75460						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.						
	Check if Austin, TX, officeholder living expense  Event Expense						
	LYON Expense						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_					
expenditure to benefit C/O							
Date	Davide name	=					
01/01/2024	Payee name Texas Federation of Republican Women						
	·	_					
Amount (\$)	Payee address; City; State; Zip Code						
\$154.24	13740 N. HIGHWAY 183 SWEET J4						
Expenditure from							
corporate funds	Austin, TX 78750-1832						
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description						
EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense						
	Conference						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/O							
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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

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)

Credit Card Payment	The Instruction Guide explains how to complete this fo	orm.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/4 Rpt: 6/7	Republican Women of Red River Valley	00085685
4 Date	5 Payee name	
01/01/2024	Texas Federation of Republican Women	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$253.75	13740 N. HIGHWAY 183 SWEET J4	
Expenditure from corporate funds	Austin, TX 78750-1832	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	
EXPENDITURE	1 503	k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense
	Membe	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/Ol		Office field
Date	Payee name	
01/01/2024	Texas Federation of Republican Women	
Amount (\$)	Payee address; City; State; Zip Code	
\$20.20	13740 N. HIGHWAY 183 SWEET J4	
— E		
Expenditure from corporate funds	Austin, TX 78750-1832	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	tion
OF EXPENDITURE		k if travel outside of Texas. Complete Schedule T.
EXPENDITURE	,	k if Austin, TX, officeholder living expense
	Annual	Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	н	
Date	Payee name	
01/19/2024	WALMART	
Amount (\$)	Payee address; City; State; Zip Code	
\$129.05	5801 S.W. REGIONAL AIRPORT BLVD.	
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Expenditure from	DENITONIVILLE AD 72712	
corporate funds	BENTONVILLE, AR 72712	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	
EXPENDITURE	L Event Expense	k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense
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Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		Office field

### 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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ı - ıl Co	mmittee	Legal Se				Expens Wages	e /Contract Labor ete this form.		Travel Out of D OTHER (enter a	strict a category not liste	ed above)
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4	Date	5	Payee name	<b>:</b>									
l	01/19/2024		WALMART	-									
<u>۔</u>	Amount (\$)	7	Payee addre	, ec.	City;	State	e; Zip Co	nde					
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l	\$15.00		5801 S.W.	REGIC	MAL AIR	PORTBLE	3D.						
I_	T Expenditure from												
ᄔ	corporate funds		BENTONV	ILLE, A	R 72712								
8	PURPOSE	(a)	Catagon	_				(h)	Description				
ľ	OF	(۵)	Category (S		ries listed at t	ne top of this so	chedule)	(6)		oute	ide of Teyes Con	nplete Schedule T	
l	EXPENDITURE		Event Expe	ense					<u> </u>		, officeholder livin		,
l									Event Expen		,	9	
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9	Complete ONLY if direct expenditure to benefit C/OH	_ (	Candidate/Off	iceholde	er name		Office sou	ught			Office h	eld	
l	expenditure to benefit C/Or	1											
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