#### 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) 00054336 3 COMMITTEE NAME **OFFICE USE ONLY** Nueces County Republican Women Date Received **ELECTRONICALLY FILED** 01/31/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 6737 Date Hand-delivered or Date Postmarked Change of Address Corpus Christi, TX 78466 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Rita C. NAME NICKNAME LAST **SUFFIX** Graham STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 437 Bermuda Place STREET **ADDRESS** (Residence or Business) Corpus Christi, TX 78411 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 437 Bermuda Place MAILING **ADDRESS** Corpus Christi, TX 78411 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (361) 728-7726 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

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

| 12 COMMITTEE NAME   |  |  | 13 Filer ID   | (Ethics Commission Filers) |
|---|--|--|---------------|----------------------------|
| Nueces County Republ  | ican Women   |  | 00054336      |                            |
| 14 COMMITTEE<br>ACTIVITY  | 1. Candidates<br>(Identify by name or, if<br>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<br>TOTALS   | PLEDGES, LOANS, CONTRIBUTIONS M check here if this report                          | 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)   | \$            | 315.00                     |
| EXPENDITURE<br>TOTALS   | 3. TOTAL UNITEMIZED  | POLITICAL EXPENDITURES   | \$            | 0.00                       |
|   | 4. TOTAL POLITICA  | L EXPENDITURES   | \$            | 595.72                     |
| CONTRIBUTION<br>BALANCE   | 5. TOTAL POLITICAL (<br>OF THE REPORTIN  | CONTRIBUTIONS MAINTAINED AS OF THE LAST<br>G PERIOD  | DAY \$        | 21,081.12                  |
| OUTSTANDING<br>LOAN TOTALS  |  | AMOUNT OF ALL OUTSTANDING LOANS AS OF T<br>REPORTING PERIOD  | THE \$        | 0.00                       |
| 16 AFFIDAVIT  | <u>'</u>   |  | <u>'</u>      |                            |
|   |  | I swear, or affirm, under penalty of pe<br>true and correct and includes all informunder Title 15, Election Code.                    |               |                            |
|   |  | Rita C.  | Graham        |                            |
|   |  | Signature of Car   | mpaign Treası | ırer                       |
| AFFIX NOTARY  | STAMP / SEAL ABOVE   |  |               |                            |
| Sworn to and subscribed   | before me, by the said   | , th   | nis 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 offi | cer administering oath     |

### **SUBTOTALS - GPAC**

# FORM **GPAC**COVER SHEET PG 3

|            |  |                             | 3 of 9                     |
|------------|--|-----------------------------|----------------------------|
| 17 COMMITT | EE NAME<br>County Republican Women   | <b>18</b> Filer ID 00054336 | (Ethics Commission Filers) |
| 19 SCHEDU  | E SUBTOTALS  |                             | SUBTOTAL AMOUNT            |
| NAME OF    | SCHEDULE   |                             | SUBTOTAL AMOUNT            |
| 1. X       | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                    |                             | <b>\$</b> 315.00           |
| 2.         | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                      |                             | \$                         |
| 3.         | SCHEDULE B: PLEDGED CONTRIBUTIONS  |                             | \$                         |
| 4.         | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION         | DR                          | \$                         |
| 5.         | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION | ATION OR                    | \$                         |
| 6.         | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG                      | SANIZATION                  | \$                         |
| 7.         | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION         | 2                           | \$                         |
| 8.         | 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> 595.72           |
| 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.        | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION               | ONS                         | \$                         |
| 15.        | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER        | RETURNED                    | \$                         |
|            |  |                             |                            |
|            |  |                             |                            |
|            |  |                             |                            |
|            |  |                             |                            |
|            |  |                             |                            |
|            |  |                             |                            |
|            |  |                             |                            |
|            |  |                             |                            |

|   | MONET                          | ARY POLITICAL CONTRIBUTION   | N  | IS   |          | SCHEDULE                                      | A1      |
|---|--------------------------------|--|----|--|----------|---|---------|
|   | The Instruc                    | ction Guide explains how to complete this f  | or | m.   | 1        | Total pages Schedule A1:<br>Sch: 1/4 Rpt: 4/9 |         |
| 2 | FILER NAME<br>Nueces Cou       | nty Republican Women   |    |  | 3        | Filer ID (Ethics Commission 00054336          | Filers) |
| 4 | Date<br>01/08/2024             | <ul> <li>Full name of contributor</li></ul>  |    |  | 7        | Amount of Contribution (\$)                   | \$20.00 |
| _ | Deinsinal assu                 | Corpus Christi, TX 78413   | _  |  | <u></u>  |   |         |
| 8 |                                | pation / Job title (See Instructions)<br>Rep. for TX-27  | 9  | Employer (See Instructions US-House of Represent |          | ves   |         |
|   | Date<br>01/08/2024             | Contributor address; City; State; Zip Code   |    | )  |          | Amount of Contribution (\$)                   | \$5.00  |
|   | Principal occu                 | Corpus Christi, TX 78414 pation / Job title (See Instructions)   |    | Employer (See Instructions                       | <u> </u> |   |         |
|   | Business Ow                    | ner  |    |  |          |   |         |
|   | Date<br>01/08/2024             | Full name of contributor   |    | )  |          | Amount of Contribution (\$)                   | \$5.00  |
|   |                                | Corpus Christi, TX 78412   |    |  |          |   |         |
|   | Principal occu<br>Self Employe | pation / Job title (See Instructions)<br>ed  |    | Employer (See Instructions                       | 5)       |   |         |
|   | Date<br>01/08/2024             | Full name of contributor out-of-state PAC (ID#:_ Carrillo, III, Albert Contributor address; City; State; Zip Code Corpus Christi, TX 78413 |    | )  |          | Amount of Contribution (\$)                   | \$5.00  |
|   | ·                              | pation / Job title (See Instructions)<br>rrome & Chemicals   |    | Employer (See Instructions                       | 5)       |   |         |
|   | Date<br>01/08/2024             | Full name of contributor out-of-state PAC (ID#:_ Carrillo, Joan Contributor address; City; State; Zip Code  Corpus Christi, TX 78413       |    |  |          | Amount of Contribution (\$)                   | \$40.00 |
|   | Principal occu<br>Retired Tead | pation / Job title (See Instructions)<br>her   |    | Employer (See Instructions                       | s)       |   |         |
|   |                                |  |    |  |          |   |         |

|   | MONEI                       | ARY POLITICAL (   | CONTRIBUTIO             | NS   |    | SCHEDULI                                      | <b>■ A1</b> |
|---|-----------------------------|---|-------------------------|--|----|---|-------------|
|   | The Instru                  | ction Guide explains how  | to complete this fo     | orm.   | 1  | Total pages Schedule A1:<br>Sch: 2/4 Rpt: 5/9 |             |
| 2 | FILER NAME                  |   |                         |  | 3  | Filer ID (Ethics Commission                   | Filers)     |
|   | Nueces Cou                  | nty Republican Women  |                         |  |    | 00054336                                      |             |
| 4 | Date<br>01/08/2024          | <ul><li>5 Full name of contributor</li><li>Cook, David</li><li>6 Contributor address; City; S</li></ul> | out-of-state PAC (ID#:  |  | 7  | Amount of Contribution (\$)                   | \$5.00      |
|   | Dringing Lagran             | Corpus Christi, TX 78383  | a I                     | O Familia de l'Ocal Instruction de l'                |    |   |             |
| 8 |                             | pation / Job title (See Instructions ,  | 5)                      | 9 Employer (See Instructions Nucces County Shoriff's |    | fice  |             |
|   | Chief Deputy                |   |                         | Nueces County Sheriff's                              | ·  |   |             |
|   | Date<br>01/08/2024          | Full name of contributor Cron, Jenny Contributor address; City; S                                       | out-of-state PAC (ID#:_ | )  |    | Amount of Contribution (\$)                   | \$20.00     |
|   |                             | Corpus Christi, TX 78412  |                         |  |    |   |             |
|   | Principal occu<br>Atorney   | pation / Job title (See Instructions  | 5)                      | Employer (See Instructions                           | 5) |   |             |
|   | Date<br>01/08/2024          | Full name of contributor  Dorsey, Jenny  Contributor address; City; S                                   | out-of-state PAC (ID#:  |  |    | Amount of Contribution (\$)                   | \$5.00      |
|   |                             | Corpus Christi, TX 78413  |                         |  |    |   |             |
|   | Principal occu              | pation / Job title (See Instructions  | 3)                      | Employer (See Instructions                           | s) |   |             |
|   | County Attor                | ney   |                         | Nueces County  |    |   |             |
|   | Date<br>01/08/2024          | Full name of contributor Granberry, James Contributor address; City; S Corpus Christi, TX 78418         | out-of-state PAC (ID#:_ | )  |    | Amount of Contribution (\$)                   | \$5.00      |
|   | •                           | pation / Job title (See Instructions  | 5)                      | Employer (See Instructions                           | 5) |   |             |
|   | District Attori             | ney, 105 Judical District   |                         | Nueces County  |    |   |             |
|   | Date<br>01/08/2024          | Full name of contributor Granndo , Arturo  Contributor address; City; S  Corpus Christi, TX 78411       | out-of-state PAC (ID#:  | )  |    | Amount of Contribution (\$)                   | \$10.00     |
|   | Principal occu<br>Insurance | pation / Job title (See Instructions  | s)                      | Employer (See Instructions<br>Grando Group           | 5) |   |             |
|   |                             |   |                         |  |    |   |             |

|   | MONET                           | ARY POLITICAL CONTR  | RIBUTION      | IS  |        | SCHEDULI                                      | <b>■ A1</b> |
|---|---------------------------------|--|---------------|---|--------|---|-------------|
|   | The Instru                      | ction Guide explains how to comp   | lete this for | m.  | 1      | Total pages Schedule A1:<br>Sch: 3/4 Rpt: 6/9 |             |
| 2 | FILER NAME<br>Nueces Cou        | nty Republican Women   |               |   | 3      | Filer ID (Ethics Commission 00054336          | ı Filers)   |
| 4 | Date<br>01/08/2024              | Hasbaoui, Mourad  6 Contributor address; City; State; Zip Cod  |               |   | 7      | Amount of Contribution (\$)                   | \$5.00      |
| 8 | Principal occu                  | Corpus Christi, TX 78416 pation / Job title (See Instructions)   | 9             | Employer (See Instructions                        | <br>;) |   |             |
|   | Business Ma                     |  |               |   |        |   |             |
|   | Date<br>01/08/2024              | Hernandez, Gil   |               |   |        | Amount of Contribution (\$)                   | \$30.00     |
|   |                                 | Corpus Christi, TX 78413   |               |   |        |   |             |
|   | Principal occu<br>Councilman    | pation / Job title (See Instructions)  |               | Employer (See Instructions City of Corpus Christi | 5)     |   |             |
|   | Date<br>01/08/2024              | Full name of contributor out-of-st Hinojosa, Victoria  Contributor address; City; State; Zip Cod                                     | ate PAC (ID#: |   |        | Amount of Contribution (\$)                   | \$40.00     |
|   |                                 | Corpus Christi, TX 78414   |               |   |        |   |             |
|   | Principal occu<br>Diamond Sa    | pation / Job title (See Instructions)<br>les   |               | Employer (See Instructions<br>Ezekiel Diamond Co  | s)     |   |             |
|   | Date<br>01/08/2024              | Jonckheere, Linda  |               | )   |        | Amount of Contribution (\$)                   | \$35.00     |
|   | Principal occu<br>Retired       | pation / Job title (See Instructions)  |               | Employer (See Instructions                        | 5)     |   |             |
|   | Date<br>01/08/2024              | Full name of contributor out-of-st Klein , Inna (The Honorable)  Contributor address; City; State; Zip Cod  Corpus Christi, TX 78418 | ate PAC (ID#: |   |        | Amount of Contribution (\$)                   | \$10.00     |
|   | Principal occu<br>214th Distric | pation / Job title (See Instructions)  |               | Employer (See Instructions Nueces County          | 5)     |   |             |
|   | 21701 DISUIC                    | Court  |               | 14deces County                                    |        |   |             |

|   | MONET                           | ARY POLITICAL CONTRIBUTIO   | NS                           |       | SCHEDULE                                      | <b>■ A1</b> |
|---|---------------------------------|---|------------------------------|-------|---|-------------|
|   | The Instruc                     | ction Guide explains how to complete this fo  | rm.                          | 1     | Total pages Schedule A1:<br>Sch: 4/4 Rpt: 7/9 |             |
| 2 | FILER NAME Nueces Cou           | nty Republican Women  |                              | 3     | Filer ID (Ethics Commission 00054336          | Filers)     |
| 4 | Date 01/08/2024                 | <ul> <li>Full name of contributor</li></ul>   | )                            | 7     | Amount of Contribution (\$)                   | \$40.00     |
| 8 | Principal occur                 | Corpus Christi, TX 78414 pation / Job title (See Instructions)  | 9 Employer (See Instructions | )<br> |   |             |
| _ | Homemaker                       | sation, oop the (See Handelons)   | 2 Employer (See Manachoria   | ')    |   |             |
|   | Date<br>01/08/2024              | Contributor address; City; State; Zip Code  | )                            |       | Amount of Contribution (\$)                   | \$5.00      |
|   | Principal occu                  | Corpus Christi, TX 78413  pation / Job title (See Instructions)   | Employer (See Instructions   | )<br> |   |             |
|   | CEO                             | (======================================   | Asset Protection             | ,     |   |             |
|   | Date<br>01/08/2024              | Full name of contributor out-of-state PAC (ID#:   | )                            |       | Amount of Contribution (\$)                   | \$5.00      |
|   |                                 | Corpus Christi, TX 78410  |                              |       |   |             |
|   | Principal occu<br>Retired       | pation / Job title (See Instructions)   | Employer (See Instructions   | 5)    |   |             |
|   | Date<br>01/08/2024              | Full name of contributor out-of-state PAC (ID#:_ Tschritter, Luke  Contributor address; City; State; Zip Code  Corpus Christi, TX 78412 | )                            |       | Amount of Contribution (\$)                   | \$5.00      |
|   | Principal occu<br>Political Con | pation / Job title (See Instructions) sultant   | Employer (See Instructions   | )     |   |             |
|   | Date<br>01/08/2024              | Full name of contributor out-of-state PAC (ID#:   |                              |       | Amount of Contribution (\$)                   | \$20.00     |
|   | Principal occu<br>Social Media  | oation / Job title (See Instructions) Manager   | Employer (See Instructions   | ()    |   |             |
|   |                                 |   |                              |       |   |             |

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

|   | Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment |  |
|---|--|--|
| 1 | Total pages Schedule F1:   | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)   |
|   | Sch: 1/2 Rpt: 8/9  | Nueces County Republican Women 00054336  |
| 4 | Date   | 5 Payee name   |
|   | 01/08/2024   | Ara's Seafood & Steaks   |
| 6 | Amount (\$)  | 7 Payee address; City; State; Zip Code   |
|   | \$120.00   | 6917 South Staples #104  |
|   | Expenditure from corporate funds   | Corpus Christi, TX 78413   |
| 8 | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|   | OF<br>EXPENDITURE  | Event Expense Check if travel outside of Texas. Complete Schedule T.   |
|   | -  | Check if Austin, TX, officeholder living expense   |
|   |  | Monthly Luncheon   |
| 9 | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held  |
|   | expenditure to benefit C/OF  |  |
|   | Date   | Payee name   |
|   | 01/08/2024   | Square, Inc.   |
|   | Amount (\$)  | Payee address; City; State; Zip Code   |
|   | \$4.05   | 1455 Market Street   |
|   |  | Unit 600   |
|   | Expenditure from corporate funds   | San Francisco, CA 94103  |
| L |  |  |
|   | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule)    Description   Check if travel outside of Texas. Complete Schedule T. |
|   | EXPENDITURE  | Fees Check if travel outside of Texas. Complete Schedule 1.  Check if Austin, TX, officeholder living expense                            |
|   |  | Credit Card Usage Fees   |
|   |  |  |
|   | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held  |
|   | expenditure to benefit C/OF  | 1  |
|   | Date   | Payee name   |
|   | 01/04/2024   | Texas Comptroller of Public Accounts   |
|   | Amount (\$)  | Payee address; City; State; Zip Code   |
|   | \$246.67   | P O Box 13528  |
|   |  |  |
|   | Expenditure from corporate funds   | Austin, TX 78711-3528  |
|   | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|   | OF<br>EXPENDITURE  | Sales and Use Tax  Check if travel outside of Texas. Complete Schedule T.  |
|   |  | Check if Austin, TX, officeholder living expense  Sales Taxes  |
|   |  | Jaies Takes  |
| _ | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held  |
|   | expenditure to benefit C/OF  |  |
|   |  |  |
|   |  |  |
|   |  |  |

## 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

|   | Contributing 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)                               |
| L | Sch: 2/2 Rpt: 9/9   | Nueces County Republican Women 00054336  |
| 4 | Date  | 5 Payee name   |
|   | 01/01/2024  | Texas Federation of Republican Women   |
| 6 | Amount (\$)   | 7 Payee address; City; State; Zip Code   |
|   | \$225.00  | P. O. Box 171146   |
|   | Expenditure from corporate funds  | Austin, TX 78717-0041  |
| 8 | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description |
|   | OF<br>EXPENDITURE   | Fees Check if travel outside of Texas. Complete Schedule T.                      |
|   |   | Check if Austin, TX, officeholder living expense                                 |
| l |   | Membership Dues Check written 12/22/23, paid on 1/09/24                          |
|   |   |  |
| 9 | Complete ONLY if direct expenditure to benefit C/OI   | Candidate/Officeholder name Office sought Office held H                          |
|   |   |  |