## CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

	FAMP / SEAL ABOVE		-	re of Campaig		day
			Signatu	re of Campaiç		
				Becky Hite	es	
			filed was made in good	faith.		
		X	Other reports: I swe report not later than the that the report as origin swear, or affirm, that an	14th busines ally filed is ina ly error or om	s day after the date accurate or incomple	e I learned ete. I
			Semiannual reports: was made in good faith misrepresent the inform	and without a	an intent to mislead	al report or to
		Che	eck the box next to any an	d all applicab	le statements:	
8 AFFIDAVIT			vear, or affirm, under pena correct.	llty of perjury,	that this corrected	report is true
<ul> <li>6 ORIGINAL PERIOD COVERED</li> <li>7 EXPLANATION OF 0 One expense was enter</li> </ul>	Month Day Yea 01/03/2024 CORRECTION ed into an incorrect category	THROUGH	01/25/2024	⁄ear	Date Imaged	
6 ORIGINAL PERIOD	8th day before election		er (specify)	Voar	Date Processed	
5 ORIGINAL REPORT TYPE	January 15 July 15 X 30th day before election		off I day after campaign treasure solution report	r resignation	Receipt #	Amount
4 TREASURER NAME	Hites, Becky				Date Hand-delivered or I	Date Postmarked
3 COMMITTEE NAME	Hays County Republica	n Women			ELECTRONICA 02/05/2024	LLY FILED
		20			Date Received	SEONLY
00068733		2 Total pages filed:				SE ONLY

## GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

# FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form.	1	Filer ID (Ethics Commission Filers) 00068733		2 Total pages filed: 20
3	COMMITTEE NAME					OFFICE USE ONLY
	Hays County Repu	ıblican Women				Date Received ELECTRONICALLY FILED 02/05/2024
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; CI	TY;	STATE; ZIP COD	DE	
	ADDRESS	P.O. Box 1697				Date Hand-delivered or Date Postmarked
	Change of Address					
	Change of Address	Dripping Springs, TX 78620-9998				Receipt # Amount
						Date Processed
						Date Imaged
L						
5	CAMPAIGN TREASURER	MS/MRS/MR FIRST				MI
	NAME	Becky				
		NICKNAME LAST Hites				SUFFIX
		T mes				
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; C	ITY;	STATE; ZIP CODE
ľ	TREASURER	519 Field Corn Lane		/ / CONL_ /, C	,	
	STREET ADDRESS					
	(Residence or Business)	San Marcos, TX 78666				
7	CAMPAIGN	STREET OR PO BOX;		APT / SUITE #;	CITY;	STATE; ZIP CODE
	TREASURER MAILING	519 Field Corn Lane				
	ADDRESS					
		San Marcos, TX 78666				
	Change of Address			55101011		
8	CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	ΕX	FENSION		
	PHONE	(917) 862-6557				
9	REPORT	January 15 X 3	Oth /	lay before election	_	Dissolution (Attach PAC-DR)
	TYPE			-		
		July 15	th da	ay before election		10th day after campaign treasurer termination
			luno	ff		
10	PERIOD	Month Day Year		Month E	Day	Year
	COVERED	01/03/2024 T	HR	DUGH 01/25	/2024	L .
11	ELECTION	ELECTION DATE			Έ	
			Prim	ary Runoff		Other
		03/05/2024	Gen	eral Special		
			10	PAGE 2		
Fo	rms provided by Tex	kas Ethics Commission www.e	thic	s.state.tx.us		Version V3.5.1.9000c47f

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Hays County Republica	n Women		00068733	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported n		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. 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 ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,575.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	0.00
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 REPORTING 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.		
		Beck	y Hites	
		Signature of Car	mpaign Treasu	rer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, tł	nis the	day
of	, 20, to certify v	vhich, witness my hand and seal of office.		
Signature of officer adr	ninistering oath	Printed name of officer administering oath	Title of offic	er administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V3.5.1.9000c47f

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

## FORM GPAC

Page 4 of 20

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Hays County Republica	an Women			00068733	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Tanner Neidhard	t District Judge	2
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. 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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Morgan Hammer County Comm	issioner Precin	ct 3
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. 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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Naomi Narvaiz SREC SD 25 Co	mmitteewomar	1
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. 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.)				
		1			

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

## FORM GPAC

Page 5 of 20

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Hays County Republica	n Women			00068733	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Tennyson Moreno State Repres	entative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. 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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Davie Saenz Constable Pct. 2		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. 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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	The Honorable Robert Updegrov	e Texas Coun	ty Court at Law #3
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. 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.)				
	•				

## FORM GPAC COVER SHEET PG 3

6 of 20

17 COMMITTEE NAME18 Filer ID(EHays County Republican Women00068733				(Ethics C	Commission Filers)
-					
19 SCH NAM	HEDULI ME OF :	SUI	BTOTAL AMOUNT		
1.	Х	\$	1,575.00		
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.	Х	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION 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 O	ORGANIZATION	\$	
9.	Х	SCHEDULE E: LOANS		\$	0.00
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	0.00
11.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	0.00
13.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.	Х	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$	2,540.11
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

**SUBTOTALS - GPAC** 

				_		
	The Instru	ction Guide explains how to complete this	; form.		Total pages Schedule A1: Sch: 1/7 Rpt: 7/20	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Hays County	y Republican Women			00068733	-
4	Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7	Amount of Contribution (\$)	
	01/09/2024					\$40.00
		6 Contributor address; City; State; Zip Code				
		San Marcos, TX 78666				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Education P	olicy	Non-profit			
	Date	Full name of contributor out-of-state PAC (ID#	#:)	T	Amount of Contribution (\$)	
	01/08/2024	BURNS, MELODY				\$100.00
		Contributor address; City; State; Zip Code		"		
		Austin, TX 78737				
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	retired					
	Date	Full name of contributor out-of-state PAC (ID#	#:)	T	Amount of Contribution (\$)	
	01/03/2024	Barchfeld, Martha				\$40.00
		Contributor address; City; State; Zip Code		"		
		Wimberley, TX 78676				
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired			<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	01/04/2024	Bettger, Brian				\$65.00
		Contributor address; City; State; Zip Code		]		
		Can Marcas TV 79666				
⊢	Dringing oog	San Marcos, TX 78666		<u> </u>		
	Principal occu retired	upation / Job title (See Instructions)	Employer (See Instructions	S)		
╘		<del></del>		<del>—</del>		
	Date	Full name of contributor out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	÷20.00
	01/04/2024	Bettger, Francine				\$60.00
		Contributor address; City; State; Zip Code				
		San Marcos, TX 78666				
$\vdash$	Dringinal occi		Employor (See Instruction			
	retired	upation / Job title (See Instructions)	Employer (See Instructions	S)		
⊢	Teureu					

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 2/7 Rpt: 8/20	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
Hays County	y Republican Women		00068733	,
4 Date 01/03/2024	5 Full name of contributor out-of-state PAC (ID#: Bright, Alfred	)	7 Amount of Contribution (\$) \$6.	62.90
	6 Contributor address; City; State; Zip Code			
	Dripping Springs, TX 78620			
8 Principal occu Retired	ipation / Job title (See Instructions)	9 Employer (See Instructions)	)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/08/2024	CLARKSON, MARY		\$4	0.00
	Contributor address; City; State; Zip Code			
	DRIPPING SPRINGS, TX 78620			
Principal occu RETIRED	ipation / Job title (See Instructions)	Employer (See Instructions)	)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/15/2024	Cofano, Michael		\$6	65.00
	Contributor address; City; State; Zip Code Driftwood, TX 78619			
	ipation / Job title (See Instructions)	Employer (See Instructions)	)	
Superintende	ent	Jenkins Design Build		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/21/2024	Goodspeed, Hailey		\$6	65.00
	Contributor address; City; State; Zip Code			
	San Marcos, TX 78666			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)	
Classroom T	eacher	San Marcos CISD		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
01/19/2024	Guilford, Ann Contributor address; City; State; Zip Code		\$4	10.00
	Wimberley, TX 78676			
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions)	)	
RN				
		1		

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
	Sch: 3/7 Rpt: 9/20
	<b>3</b> Filer ID (Ethics Commission Filers)
Hays County Republican Women	00068733
	7 Amount of Contribution (\$)
01/22/2024 Hammer, Morgan	\$40.00
6 Contributor address; City; State; Zip Code	
San Marcos, TX 78666	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	<u> </u> ;)
Financial Advisor	,
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/21/2024 Jones, Abby	\$65.00
Contributor address; City; State; Zip Code	
San Marcos, TX 78666	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	;)
Hairstylist Self Employed	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/19/2024 MCDORMAN, ANN	\$40.00
Contributor address; City; State; Zip Code	
WIMBERLEY, TX 78676           Principal occupation / Job title (See Instructions)         Employer (See Instructions)	
retired	·)
	Amount of Contribution (\$)
Date Full name of contributor out-of-state PAC (ID#:) 01/05/2024 Marshall, Karen	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code	ψ-0.00
Continuator address, City, State, Zip Code	
Buda, TX 78610	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	;)
Retired	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/08/2024 McBeth, Mary	\$40.00
Contributor address; City; State; Zip Code	
San Marcos, TX 78666	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	3)
	s) 

The Inst	ruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 4/7 Rpt: 10/20	
2 FILER NAM	 1E		<b>3</b> Filer ID (Ethics Commission File	ers)
	nty Republican Women		00068733	510,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
01/05/202			9	\$60.00
	6 Contributor address; City; State; Zip Code			
	Wimberley, TX 78676			
-	ccupation / Job title (See Instructions)	9 Employer (See Instructions	)	
retired				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/05/202			9	\$60.00
	Contributor address; City; State; Zip Code			
	SAN MARCOS, TX 78666			
	cupation / Job title (See Instructions)	Employer (See Instructions	)	_
retired				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/21/202			9	\$60.00
	Contributor address; City; State; Zip Code			
	Dripping Springs, TX 78619			
-	cupation / Job title (See Instructions)	Employer (See Instructions	)	
retired				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/20/202	4 PAUL, MARY PAT		9	\$40.00
	Contributor address; City; State; Zip Code			
<b>-</b> 1 in al au	DRIPPING SPRINGS, TX 78620			
	cupation / Job title (See Instructions)	Employer (See Instructions	)	
RETIRED				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
01/20/202			4	\$25.00
	Contributor address; City; State; Zip Code			
Dringinglig	DRIPPING SPRINGS, TX 78620	Employer (Cas Instructions		
RETIRED	cupation / Job title (See Instructions)	Employer (See Instructions	)	
RETIRED				
				1

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 5/7 Rpt: 11/20
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	y Republican Women		00068733
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
01/07/2024	Pugh, Eva Moore		\$60.00
	6 Contributor address; City; State; Zip Code		
	Austin, TX 78737		
	pation / Job title (See Instructions)	9 Employer (See Instructions	3)
Pharmacist		H-E-B	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/03/2024	SISK, CARLA		\$65.00
	Contributor address; City; State; Zip Code		1
	SAN MARCOS, TX 78666		
	pation / Job title (See Instructions)	Employer (See Instructions	3)
SELF EMPL	OYED		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/03/2024	SISK, CARLA		\$65.00
	Contributor address; City; State; Zip Code		1
	SAN MARCOS, TX 78666		
-	pation / Job title (See Instructions)	Employer (See Instructions	3)
SELF EMPL	.0YED		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/08/2024	Speed, Glenna		\$40.00
	Contributor address; City; State; Zip Code		1
	· · · · ·		
	Dripping Springs, TX 78620		
	ipation / Job title (See Instructions)	Employer (See Instructions	\$)
retired			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
01/05/2024	Steidinger, Barbara		\$60.00
	Contributor address; City; State; Zip Code		1
	<u>.</u>		
	Dripping Springs, TX 78620		
	pation / Job title (See Instructions)	Employer (See Instructions	\$)
Retired			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/7 Rpt: 12/20	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
-		y Republican Women			00068733	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	01/05/2024	Sullivan, Marie				\$62.10
		6 Contributor address; City; State; Zip Code				
		Dripping Springs, TX 78620				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Computer Er	ngineer	NXP Semiconductors			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/19/2024	Terrell, Tracy				\$40.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78737				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Director of S	jales				
╞	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	01/13/2024	Trainor, Abigail				\$5.00
	-			·		
		Driftwood, TX 78619				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Social Media	a Co-ordinator				
	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u> )	Γ	Amount of Contribution (\$)	
	01/13/2024	Trainor, Lucy				\$40.00
	•=.==	Contributor address; City; State; Zip Code				Ŧ ·
		Driftwood, TX 78619				
	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Consultant	•	Republican Party of TX			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:_	<u> </u>	Τ	Amount of Contribution (\$)	
	01/13/2024	Trainor, Mary Catherine	/			\$5.00
	0_,	Contributor address; City; State; Zip Code				· · · ·
		Contributor address, City, State, Zip Code				
		Driftwood, TX 78619				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Student			0)		
┣—						
i -						

## MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/7 Rpt: 13/20 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Hays County Republican Women 00068733 4 5 Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 7 01/08/2024 \$25.00 Trevino, Toni 6 Contributor address; City; State; Zip Code Rio Grande City, TX 78582 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) self employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/05/2024 \$60.00 Wright-Reaneau, Tracie Contributor address; City; State; Zip Code New Braunfels, TX 78130 Principal occupation / Job title (See Instructions) Employer (See Instructions) State of Texas Judge

## **PLEDGED CONTRIBUTIONS** SCHEDULE **B** 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 14/20 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Hays County Republican Women 00068733 4 \$ 0.00 TOTAL OF UNITEMIZED PLEDGES In-kind description 5 Date 6 Full name of pledgor out-of-state PAC (ID#: 8 Amount of 9 ) (If applicable) pledge (\$) ..... 7 Pledgor Address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T 10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

LOANS		SCH	HEDULE E
The Instruction Guide explains how to complete this form.	1	bages Schedule E L/1 Rpt: 15/20	<u></u>
2 FILER NAME Hays County Republican Women	3 Filer II 00068	D (Ethics Comr 3733	nission Filers)
<sup>4</sup> TOTAL OF UNITEMIZED LOANS	•	\$	0.00
5 Date of loan 7 Name of lender out-of-state PAC (ID#:		<b>9</b> Loan Amo	unt (\$)
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		10 Interest Ra	
			ale
<b>12</b> Principal occupation / Job title (See Instructions) <b>13</b> Employer (See Instructions)	6)		
14 Description of Collateral       15 Check if personal funds we         None	ere deposite	ed into political a (See Instru	
16     GUARANTOR     17     Name of guarantor       INFORMATION     INFORMATION		19 Amount G	uaranteed (\$)
not applicable <b>18</b> Guarantor address; City; State; Zip Code			
20 Principal occupation     21 Employer (See Instructions)	5)		

SCHEDULE |

	The Instruction Guide explains how to	
Total pages Schedule I: Sch: 1/5 Rpt:	2 FILER NAME Hays County Republican Women	3 Filer ID (Ethics Commission Filers) 00068733
Date 01/03/2024	5 Payee name AMAZON	
Amount (\$) 22.30	7 Payee Address; City; State; Zip 410 TERRY AVENUE N.	
Expenditure from corporate funds	SEATTLE, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Table cloths for meeting food buffet
Date 01/03/2024	Payee name AMAZON	
Amount (\$) 54.13	Payee Address; City; State; Zip 410 TERRY AVENUE N.	
Expenditure from corporate funds	SEATTLE, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Portable Projection Screen
Date 01/12/2024	Payee name AMAZON	
Amount (\$) 20.51	Payee Address; City; State; Zip 410 TERRY AVENUE N.	
Expenditure from corporate funds	SEATTLE, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Bank deposit stamp
Date	Payee name	
01/16/2024 Amount (\$) 70.18	AMAZON Payee Address; City; State; Zip 410 TERRY AVENUE N.	
corporate funds	SEATTLE, WA 98109	<b>n</b> >
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) American/Texas flags and collapsible poles

SCHEDULE |

	The Instruction Guide explains how to	complete this form.
Total pages Schedule I: Sch: 2/5 Rpt:	2 FILER NAME Hays County Republican Women	3 Filer ID (Ethics Commission Filers) 00068733
Date 01/22/2024	5 Payee name AMAZON	
Amount (\$) 477.38	7 Payee Address; City; State; Zip 410 TERRY AVENUE N.	
Expenditure from corporate funds	SEATTLE, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required. Video projector and bag
Date 01/24/2024	Payee name Creekhouse Kitchen & Bar	
Amount (\$) 59.75 Expenditure from	Payee Address; City; State; Zip 14015 Ranch Rd 12	
corporate funds	Wimberley, TX 78676	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required. Lunch with candidate campaign
Date 01/03/2024	Payee name Dillard's	
Amount (\$) 68.20	Payee Address;City; State; Zip4000 Vista Ridge	
Expenditure from corporate funds	Bee Cave, TX 78738	
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. Outgoing gift to TFRW District Director
Date	Payee name	L
01/25/2024	Dripping Springs Distilling	
Amount (\$) 10.42	Payee Address; City; State; Zip 5330 Bell Springs Rd	
Expenditure from corporate funds	Dripping Springs, TX 78620	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required. New member first drink on us program

SCHEDULE I

Date5Payee name01/16/2024Ellen, SandiAmount (\$)7Payee Addre103.001645 Main SExpenditure from corporate fundsBuda, TX 78PURPOSE OF EXPENDITURE(a) Category (See Food/BeverDatePayee name01/12/2024Funk, SaraAmount (\$)Payee Addre2000750 DawnviExpenditure from corporate fundsDripping SpPURPOSE OF EXPENDITURE(a) Category (See Food/BeverDatePayee name01/12/2024Payee AddreAmount (\$)Payee Addre2000SpPURPOSE OF EXPENDITURE(a) Category (See Website upoDatePayee name01/03/2024HEBAmount (\$)Payee Addre155.955401 FM 16Expenditure from corporate fundsFuller, TX 78PURPOSE OF EXPENDITURE(a) Category (See Food/Bever	ss; City; State; Zip St. Box 37 3610 instructions for examples of acceptable categories; age Expense ss; City; State; Zip ew rings, TX 78620 instructions for examples of acceptable categories; date	Dec mtg	
01/16/2024Ellen, SandiAmount (\$)7Payee Addre 1645 Main S103.00Buda, TX 78PURPOSE OF EXPENDITURE(a) Category (See Food/BeverDate 01/12/2024Payee name Funk, SaraAmount (\$)Payee Addre 750 DawnviExpenditure from corporate fundsDripping SpPURPOSE OF EXPENDITURE(a) Category (See Food/BeverDate 01/12/2024Payee name Funk, SaraAmount (\$)Payee Addre 750 DawnviDate OF EXPENDITUREPayee name Uripping SpPURPOSE OF EXPENDITURE(a) Category (See Website updDate 01/03/2024Payee name Dripping SpDate 01/03/2024Payee name Dripping SpDate 01/03/2024Payee name Dripping SpDate 01/03/2024Payee name 	ss; City; State; Zip St. Box 37 3610 instructions for examples of acceptable categories; age Expense ss; City; State; Zip ew rings, TX 78620 instructions for examples of acceptable categories; date	s) (b) Description (See instructions regarding type of information in	
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corporate fundsBuda, TX 78PURPOSE OF EXPENDITURE(a) Category (See Food/BeverDate 01/12/2024Payee name Funk, SaraAmount (\$)Payee Addre 750 DawnviExpenditure from corporate fundsDripping SpPURPOSE OF EXPENDITURE(a) Category (See Website updDate 01/03/2024Payee name HEBAmount (\$)Payee name Dripping SpDate OF EXPENDITUREPayee name Dripping SpDate OF EXPENDITUREPayee name State (a) Category (See S401 FM 16 S401 FM 16Date 01/03/2024Payee Addre Food/Bever	instructions for examples of acceptable categories, age Expense ss; City; State; Zip ew rings, TX 78620 instructions for examples of acceptable categories, date ss; City; State; Zip	s) (b) Description (See instructions regarding type of information in	
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Expenditure from corporate funds       Dripping Sp         PURPOSE OF EXPENDITURE       (a) Category (See Website upone)         Date       Payee name         01/03/2024       HEB         Amount (\$)       Payee Addre         155.95       5401 FM 16         Expenditure from corporate funds       Kyle, TX 78         PURPOSE OF EXPENDITURE       (a) Category (See Food/Bever	rings, TX 78620 instructions for examples of acceptable categories; date ss; City; State; Zip		required.
corporate fundsDripping SpPURPOSE OF EXPENDITURE(a) Category (See Website updDatePayee name HEB01/03/2024HEBAmount (\$)Payee Addre 5401 FM 16155.955401 FM 16 Kyle, TX 78PURPOSE OF EXPENDITURE(a) Category (See Food/Bever	instructions for examples of acceptable categories; date ss; City; State; Zip		required.
OF EXPENDITURE     Website upon       Date     Payee name       01/03/2024     HEB       Amount (\$)     Payee Addres       155.95     5401 FM 16       Expenditure from corporate funds     Kyle, TX 78       PURPOSE OF EXPENDITURE     (a) Category (See Food/Bever	date ss; City; State; Zip		required.
EXPENDITURE     Product of the second s	ss; City; State; Zip	Website update	
01/03/2024     HEB       Amount (\$)     Payee Addre       155.95     5401 FM 16       Expenditure from corporate funds     Kyle, TX 78       PURPOSE OF EXPENDITURE     (a) Category (See Food/Bever			
Amount (\$)     Payee Address       155.95     5401 FM 16       Expenditure from corporate funds     Kyle, TX 78       PURPOSE OF EXPENDITURE     (a) Category (See Food/Bever			
155.955401 FM 16Expenditure from corporate fundsKyle, TX 78PURPOSE OF EXPENDITURE(a) Category (See Food/Bever			
155.95       Expenditure from corporate funds       PURPOSE OF EXPENDITURE   (a) Category (See Food/Bever	200		
corporate funds     Kyle, TX 78       PURPOSE     (a) Category (See       OF     Food/Bever	20		
PURPOSE OF EXPENDITURE (a) Category (See Food/Bever	640		
OF Food/Bever	instructions for examples of acceptable categories	s) (b) Description (See instructions regarding type of information	required.
Data Davas nama	age Expense	Food for meeting buffet	·
Date Payee name			
01/09/2024 HEB			
Amount (\$) Payee Addre	ss; City; State; Zip		
58.92 5401 FM 16	26		
Expenditure from	0.40		
corporate funds Kyle, TX 78		1	
	instructions for examples of acceptable categories; age Expense	s) (b) Description (See instructions regarding type of information ) Jan Mtg	required.

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	The Instruction Guide explains how to	complete this form.
Total pages Schedule I: Sch: 4/5 Rpt:	2 FILER NAME Hays County Republican Women	3       Filer ID       (Ethics Commission Filers)         00068733
Date 01/16/2024	5 Payee name Intuit Quick Books	
Amount (\$) 15.99 Expenditure from	7 Payee Address; City; State; Zip 250 E. Eagles Gate Dr.	
corporate funds	Boise, ID 83616	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required. Accounting Software Subscription
Date	Payee name	
01/08/2024	Life Storage	
Amount (\$) 86.00	Payee Address; City; State; Zip 5141 Cromwell Dr,	
Expenditure from corporate funds	Kyle, TX 78640	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required. Storage Space
Date	Payee name	
01/16/2024	QR.io	
Amount (\$) 350.00	Payee Address; City; State; Zip 9450 SW Gemini Dr	
Expenditure from corporate funds	Beaverton, OR 97008	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) QR Code Generator	(b) Description (See instructions regarding type of information required. QR Code Generator
Date 01/18/2024	Payee name SAN MARCOS PARKS & REC	
Amount (\$)	Payee Address; City; State; Zip 401 E. HOPKINS	
212.00 Expenditure from corporate funds	SAN MARCOS, TX 78666	

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	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule I: Sch: 5/5 Rpt:	2 FILER NAME Hays County Republican Women	3 Filer ID (Ethics Commission Filers) 00068733
4 Date 01/16/2024	5 Payee name Sam's Club	
6 Amount (\$) 219.57 Expenditure from	<ul> <li>Payee Address; City; State; Zip</li> <li>1350 Leah Ave</li> </ul>	
corporate funds 3 PURPOSE OF EXPENDITURE	San Marcos, TX 78666 (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Jan mtg taco bar
Date 01/16/2024 Amount (\$) 38.38	Payee name SquareSpace Payee Address; City; State; Zip 8 Clarkson St	
Expenditure from corporate funds PURPOSE OF EXPENDITURE	New York, NY 10014 (a) Category (See instructions for examples of acceptable categories) Website Development	(b) Description (See instructions regarding type of information required.) Website Development
Date 01/25/2024	Payee name Vista Print	
Amount (\$) 117.43 Expenditure from corporate funds	Payee Address; City; State; Zip 275 Wyman Street Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Printing Expense	(b) Description (See instructions regarding type of information required.) Thank you cards and envelopes