CORRECTION/AMENDMENT AFFIDAVIT FORM COR-PAC FOR POLITICAL COMMITTEE Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00054336 Date Received COMMITTEE Nueces County Republican Women **ELECTRONICALLY FILED** NAME 02/05/2024 TREASURER Graham, Rita C. NAME Date Hand-delivered or Date Postmarked **ORIGINAL** January 15 Runoff REPORT TYPE Receipt # Amount July 15 10th day after campaign treasurer resignation Dissolution report 30th day before election Date Processed 8th day before election Other (specify) ORIGINAL PERIOD Month Year Month Day Year Day Date Imaged **COVERED THROUGH** 02/23/2023 06/30/2023 **EXPLANATION OF CORRECTION** I discovered the error on Jan. 19, 2024. When starting a new semi-annual report for 2024, I realized that Schedule I was used to report expenditures instead of Schedule F1. All the information that was submitted to the TEC is accurate and correct except for the use of the wrong schedule to file said expenditures. I will be changing nothing that was reported on the report except to use Schedule F1 for expenditures. I am asking for a waiver of a latefiling penalty, if any, in connection with this correction. This was a clerical mistake and I was not trying to be deceptive. Rita C. Graham AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. Rita C. Graham Signature of Campaign Treasurer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said _____, this the _____ day _____, 20_____, to certify which, witness my hand and seal of office.

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

Printed name of officer administering oath

Signature of officer administering oath

Title of officer administering oath

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** 02/05/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 6737 Date Hand-delivered or Date Postmarked X 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 X 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) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 02/23/2023 06/30/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

L2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Nueces County Repu	ıblican Women		00054336	i
4 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 Magauras	A. Supported		
	Measures (Describe by date and location	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	3. Officeholders			
	Assisted (Identify by name or, if applicable, classify by party.)			
E CONTRIBUTION		DOLITICAL CONTRIBUTIONS (OTUED TUAN	<u> </u>	
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA			
	(OTHER THAN PLE	EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,085.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	1,073.13
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	17,481.15
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
6 AFFIDAVIT	L		<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
			Graham	
		Signature of Ca	mpaign Treasu	urer
AFFIX NOTAR	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ed before me, by the said	, tl	his the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of office	cer administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

					4 of 20
17 CON	MMITTE	E NAME	18 Filer ID	(Ethics Commission	n Filers)
Nue	eces C	ounty Republican Women	00054336	•	,
l		E SUBTOTALS SCHEDULE		SUBTOTAL A	AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,085.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.)R	\$		
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR 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.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	1,073.13
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	DNS		SCHEDULI	■ A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/11 Rpt: 5/20	
2	FILER NAME Nueces Cou	nty Republican Women		3	Filer ID (Ethics Commission 00054336	Filers)
4	Date 03/13/2023	 5 Full name of contributor out-of-state PAC (ID#:_Baker, Barbie 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$20.00
8	Principal occu	Corpus Christi, TX 78413 pation / Job title (See Instructions)	9 Employer (See Instructions	(i)		
	Ower/Market			,		
	Date 04/10/2023	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Ower/Market	ting				
	Date 06/12/2023	Full name of contributor out-of-state PAC (ID#:_ Baker, Barbie Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
		Corpus Christi, TX 78413				
	•	pation / Job title (See Instructions) Rep. for TX-27	Employer (See Instructions US-House of Represent		ves	
	Date 03/13/2023	Full name of contributor out-of-state PAC (ID#:_Ballenger, Kimberly Contributor address; City; State; Zip Code Corpus Christi, TX 78414)		Amount of Contribution (\$)	\$5.00
	Principal occu Business Ow	pation / Job title (See Instructions) vner	Employer (See Instructions Self	5)		
	Date 04/10/2023	Full name of contributor out-of-state PAC (ID#:_Ballenger, Kimberly Contributor address; City; State; Zip Code Corpus Christi, TX 78414			Amount of Contribution (\$)	\$40.00
	Principal occu Business Ow	pation / Job title (See Instructions) vner	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIB	BUTIONS			SCHEDULI	E A1
	The Instru	ction Guide explains how to complet	e this form.		1	Total pages Schedule A1: Sch: 2/11 Rpt: 6/20	
2	FILER NAME Nueces Cou	nty Republican Women			3	Filer ID (Ethics Commission 00054336	r Filers)
4	Date 05/08/2023	 Full name of contributor	,)	7	Amount of Contribution (\$)	\$20.00
		Corpus Christi, TX 78414					
8	Principal occu Business Ov	pation / Job title (See Instructions) Iner	9 Emp	loyer (See Instructions)		
	Date 06/12/2023	Full name of contributor out-of-state F Ballenger, Kimberly Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu	Corpus Christi, TX 78414 pation / Job title (See Instructions)	Emr	loyer (See Instructions)		
	Business Ov				,		
	Date 03/13/2023	Full name of contributor out-of-state Pagem, Bernie Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$10.00
		Corpus Christi, TX 78411					
	Principal occu Court Report	oation / Job title (See Instructions) er	Emp	loyer (See Instructions)		
	Date 03/13/2023	Full name of contributor out-of-state F Bradford, Rebecca Contributor address; City; State; Zip Code Corpus Christi, TX 78414	PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu Business Ow	oation / Job title (See Instructions) rner		loyer (See Instructions Employed)		
	Date 04/10/2023	Full name of contributor out-of-state F Britt, Kirsti Contributor address; City; State; Zip Code Corpus Christi, TX 78414	PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu Attorney	pation / Job title (See Instructions)		loyer (See Instructions ces County)		

	MONET	ARY POLITICAL CONTRIBUTION	Ν	IS		SCHEDULE	A1
	The Instruc	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 3/11 Rpt: 7/20	
2	FILER NAME Nueces Cou	nty Republican Women			3	Filer ID (Ethics Commission 00054336	Filers)
4	Date 04/10/2023	 Full name of contributor out-of-state PAC (ID#:_Calderone, Carmen Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$45.00
8	Principal occur	Corpus Christi, TX 78414 pation / Job title (See Instructions)	Ια	Employer (See Instructions	·/		
0	Analyzer Tec		"	Flint Hills Resources	·)		
	Date 04/10/2023	Full name of contributor out-of-state PAC (ID#:_ Carrillo, Joan Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$35.00
		Corpus Christi, TX 78413	_				
	Principal occup Retired Teac	pation / Job title (See Instructions) cher		Employer (See Instructions	5)		
	Date 03/13/2023	Full name of contributor out-of-state PAC (ID#:_ Cook, David Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
		Corpus Christi, TX 78383					
	Principal occu Chief Deputy	pation / Job title (See Instructions)		Employer (See Instructions Nueces County Sheriff's		ffice	
	Date 04/10/2023	Full name of contributor out-of-state PAC (ID#:_ Dorsey, Jenny Contributor address; City; State; Zip Code Corpus Christi, TX 78413)		Amount of Contribution (\$)	\$5.00
	Principal occu County Attor	pation / Job title (See Instructions) ney		Employer (See Instructions Nueces County	5)		
	Date 05/08/2023	Full name of contributor out-of-state PAC (ID#:_ Dorsey, Jenny Contributor address; City; State; Zip Code Corpus Christi, TX 78413				Amount of Contribution (\$)	\$5.00
	Principal occu County Attor	pation / Job title (See Instructions)		Employer (See Instructions Nueces County	5)		
		-,	<u> </u>				

	MONET	ARY POLITICAL COI	NTRIBUTION	S 		SCHEDUL	E A1
	The Instru	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 4/11 Rpt: 8/20	
2	FILER NAME Nueces Cou	nty Republican Women			3	Filer ID (Ethics Commission 00054336	n Filers)
4	Date 03/13/2023	 5 Full name of contributor)	7	Amount of Contribution (\$)	\$15.00
		Corpus Christi, TX 78413					
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 06/12/2023	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu	Corpus Christi, TX 78414-361: pation / Job title (See Instructions)		Employer (See Instructions)		
	Retired				,		
	Date 05/08/2023	Full name of contributor	out-of-state PAC (ID#: Zip Code)		Amount of Contribution (\$)	\$100.00
		Corpus Christi, TX 78413					
	•	pation / Job title (See Instructions) ce Counselor		Employer (See Instructions Seaside Memorial Park)		
	Date 05/08/2023	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$60.00
	Principal occu CFO	pation / Job title (See Instructions)		Employer (See Instructions Ezekiel Diamond Co)		
	Date 06/12/2023	Full name of contributor Contributor Contributor address; City; State; 2	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$40.00
	Principal occu State Rep-H	pation / Job title (See Instructions)		Employer (See Instructions State of Texas)		
			I				

	MONET	ARY POLITICAL C	ONTRIBUTIOI	NS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how t	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 5/11 Rpt: 9/20	
2	FILER NAME Nueces Cou	nty Republican Women			3	Filer ID (Ethics Commission 00054336	Filers)
4	Date 06/12/2023	5 Full name of contributor	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$20.00
_		Corpus Christi, TX 78414			<u></u>		
8	Principal occur Retired	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 03/07/2023	Full name of contributor Jones, Grace Contributor address; City; Stat)		Amount of Contribution (\$)	\$20.00
	Principal occu	Alice, TX 78332 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Business Ma	nager					
	Date 04/10/2023	Full name of contributor [Klein , Inna (Judge) Contributor address; City; Stat	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
		Corpus Christi, TX 78418					
	Principal occu District Court	pation / Job title (See Instructions)		Employer (See Instructions Nueces County	5)		
	Date 06/12/2023	Full name of contributor [Klein , Inna (Judge) Contributor address; City; Stat)		Amount of Contribution (\$)	\$10.00
	Principal occu District Court	pation / Job title (See Instructions)		Employer (See Instructions Nueces County	5)		
	Date 04/10/2023	Full name of contributor LaBaume, Sandra A Contributor address; City; Stat Corpus Christi, TX 78414	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
	Principal occu Homemaker	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	■ A1
	The Instruc	tion Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/11 Rpt: 10/20	
2	FILER NAME Nueces Cour	nty Republican Women		3	Filer ID (Ethics Commission 00054336	Filers)
4	Date 06/12/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$5.00
8	Dringing! goog	Corpus Christi, TX 78414	• Employer (See Instructions			
0	Homemaker	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 06/12/2023	Full name of contributor out-of-state PAC (ID#: Lancaster, Mary Ann Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
		Corpus Christi, TX 78415				
	Principal occu _l Waitress	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/13/2023	Full name of contributor out-of-state PAC (ID#: Locus, Kimberly Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
		Port Aransas, TX 78373				
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/07/2023	Full name of contributor out-of-state PAC (ID#:_Mays, Becky Contributor address; City; State; Zip Code Rockport, TX 78382			Amount of Contribution (\$)	\$35.00
	Principal occup	oation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/10/2023	Full name of contributor out-of-state PAC (ID#:_Mays, Becky Contributor address; City; State; Zip Code Rockport , TX 78382)		Amount of Contribution (\$)	\$20.00
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 7/11 Rpt: 11/20	
2	FILER NAME Nueces Cou	nty Republican Women		3	Filer ID (Ethics Commission 00054336	Filers)
4	Date 06/12/2023	 Full name of contributor	_	7	Amount of Contribution (\$)	\$5.00
_		Corpus Christi, TX 78410	1			
8	Principal occur retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/13/2023	Full name of contributor out-of-state PAC (ID#:_ Nurnberg, Hannah Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$35.00
	Principal occur	Corpus Christi, TX 78414 pation / Job title (See Instructions)	Employer (See Instructions	·/		
	Student	valion / Job title (See Instructions)	Employer (See instructions	,		
	Date 04/10/2023	Full name of contributor out-of-state PAC (ID#:_Olsson, Natalie Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.00
		Corpus Christi, TX 78413				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/13/2023	Full name of contributor out-of-state PAC (ID#: Parshall, Jerry Contributor address; City; State; Zip Code Corpus Christi, TX 78415			Amount of Contribution (\$)	\$15.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/13/2023	Full name of contributor out-of-state PAC (ID#: Pate, Linda Contributor address; City; State; Zip Code Corpus Christi, TX 78411			Amount of Contribution (\$)	\$5.00
	Principal occu Community \	pation / Job title (See Instructions)	Employer (See Instructions Self Employed	5)		
	Sommunity (Son Employed			

	MONET	ARY POLITICAL C	ONTRIBUTION	S 		SCHEDULE	E A1
	The Instru	ction Guide explains how t	to complete this form	m.	1	Total pages Schedule A1: Sch: 8/11 Rpt: 12/20	
2	FILER NAME Nueces Cou	nty Republican Women			3	Filer ID (Ethics Commission 00054336	Filers)
4	Date 04/10/2023	5 Full name of contributor			7	Amount of Contribution (\$)	\$5.00
		Corpus Christi, TX 78411					
8	Principal occu Community	pation / Job title (See Instructions) /olunteer	9	Employer (See Instructions Self Employed	s)		
	Date 05/08/2023	Full name of contributor [Pate, Linda Contributor address; City; Stat	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Corpus Christi, TX 78411 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	Community \				,		
	Date 06/12/2023	Full name of contributor Pate, Linda Contributor address; City; Stat	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$5.00
		Corpus Christi, TX 78411					
	Principal occu Community	pation / Job title (See Instructions) /olunteer		Employer (See Instructions	5)		
	Date 03/13/2023	Full name of contributor Perrin, Debra G Contributor address; City; Stat Corpus Christi, TX 78402	out-of-state PAC (ID#: te; Zip Code)	•	Amount of Contribution (\$)	\$15.00
	Principal occu Retied Rad	pation / Job title (See Instructions) Fech		Employer (See Instructions	5)		
	Date 04/10/2023	Full name of contributor Phaleh, Diana Contributor address; City; State Port Aransas, TX 78373	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$35.00
	Principal occu Nuclear Eng	pation / Job title (See Instructions) ineer		Employer (See Instructions	5)		

	MONEI	ARY POLITICAL (CONTRIBUTIO	JNS		SCHEDULE	■ A1
	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/11 Rpt: 13/20	
2	FILER NAME Nueces Cou	nty Republican Women			3	Filer ID (Ethics Commission 00054336	ı Filers)
4	Date 04/10/2023	5 Full name of contributor Rameros, Chrissy6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$40.00
		Corpus Christi, TX 78418					
8		pation / Job title (See Instructions	5)	9 Employer (See Instructions			
	Legislator As	ssistant ———————————————————————————————————		State Rep. Todd Hunter	•		
	Date 04/10/2023	Full name of contributor Resley, Daniel Contributor address; City; St	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$30.00
		Corpus Christi, TX 78418	-5904				
	Principal occu Retired	pation / Job title (See Instructions	5)	Employer (See Instructions	S)		
	Date 05/05/2023	Full name of contributor Resley, Daniel Contributor address; City; Si				Amount of Contribution (\$)	\$5.00
	5: : 1	Corpus Christi, TX 78418		l = ,	Ĺ		
	Retired	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date 05/08/2023	Full name of contributor Seaman, Eugene Contributor address; City; St	tate; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu Financial Pla	pation / Job title (See Instructions		Employer (See Instructions Seaman Financial Servi		S	
	Date 06/12/2023	Full name of contributor Sims, Orlando Contributor address; City; Si Corpus Christi, TX 78414				Amount of Contribution (\$)	\$5.00
	Principal occu Retired	pation / Job title (See Instructions		Employer (See Instructions	<u> </u> S)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULI	■ A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/11 Rpt: 14/20	
2	FILER NAME Nueces Cou	nty Republican Women		3	Filer ID (Ethics Commission 00054336	Filers)
4	Date 03/14/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	San Francisco, CA 94103 pation / Job title (See Instructions)	Employer (See Instructions) ()		
Ŭ	i illopai occa	sation, con the (occ mandations)	2 Employer (See manacions	')		
	Date 05/08/2023	Full name of contributor out-of-state PAC (ID#:_ Terzo, Diana Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$35.00
		Corpus Christi, TX 78413				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/12/2023	Full name of contributor out-of-state PAC (ID#:_ Terzo, Diana Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
		Corpus Christi, TX 78413				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 05/08/2023	Full name of contributor out-of-state PAC (ID#:_ Thompson, Patrice Contributor address; City; State; Zip Code Corpus Christi, TX 78418			Amount of Contribution (\$)	\$35.00
	Principal occu Retired Nurs	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/13/2023	Full name of contributor out-of-state PAC (ID#:_ Trolley, Dolly Contributor address; City; State; Zip Code Corpus Christi, TX 78411			Amount of Contribution (\$)	\$35.00
	Principal occu Consultant	pation / Job title (See Instructions)	Employer (See Instructions Self Employed	()		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	he Instruction Guide explains how to complete this form.		1	Total pages Schedule A1: Sch: 11/11 Rpt: 15/20		
2	FILER NAME Nueces Cou	: unty Republican Women		3	Filer ID (Ethics Commission Filers) 00054336		
4	Date 05/08/2023	Full name of contributor)	7	Amount of Contribution (\$)	\$20.00	
_	Daine in all a con-	Corpus Christi, TX 78411	D. Faralassa (Garalassa Sarahasi				
8	Consultant	pation / Job title (See Instructions)	9 Employer (See Instructions Self Employed	5)			
	Date 04/10/2023	Full name of contributor out-of-state PAC (ID#:_ Tschritter, Luke Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00	
	Corpus Christi, TX 78412 Principal occupation / Job title (See Instructions) Employer (See Instructions) Political Consultant		Employer (See Instructions	5)			
	Date 04/10/2023	Full name of contributor out-of-state PAC (ID#:_ Tschritter, Maddie Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.00	
		Corpus Christi, TX 78412					
	Principal occu Business Ov	pation / Job title (See Instructions) vner	Employer (See Instructions	5)			
	Date 04/10/2023	Full name of contributor out-of-state PAC (ID#:_ Walker, Brian (Judge) Contributor address; City; State; Zip Code Fort Worth , TX 76101			Amount of Contribution (\$)	\$5.00	
	Principal occupation / Job title (See Instructions) Judge Employer (See Instructions)		5)				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Reimbursement Solicitation/Fundraising Expense
ental Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schodule F1:	· · · · · · · · · · · · · · · · · · ·
Total pages Schedule F1: Sch: 1/5 Rpt: 16/20	Nueces County Republican Women 00054336
4 Date	5 Payee name
03/13/2023	Ara's Seafood & Steaks
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$100.00	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 EXPENDITURE	Event Expense
_/	Check if Austin, TX, officeholder living expense
	Monthly Membership Lunch
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to benefit Gree	
Date	Payee name
04/10/2023	Ara's Seafood & Steaks
Amount (\$)	Payee address; City; State; Zip Code
\$140.00	6917 South Staples #104
Expenditure from corporate funds	Corpus Christi, TX 78413
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 Monthly Membership Lunch
	Monthly Wembership Eurich
Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
05/08/2023	Ara's Seafood & Steaks
Amount (\$)	Payee address; City; State; Zip Code
\$120.00	6917 South Staples
Expenditure from corporate funds	Corpus Christi, TX 78413
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 Monthly Membership Lunch
	Monthly Membership Editor
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	• • • • • • • • • • • • • • • • • • •

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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
OTHER (orbegoeder) and listed above)

Candidate/Officeholder/Politica Credit Card Payment	I 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: 2/5 Rpt: 17/20	Nueces County Republican Women 00054336		
4 Date	5 Payee name		
06/12/2023	Ara's Seafood & Steaks		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$100.00	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 EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense Monthly Membership Lunch		
	Worlding Weinbership Eurien		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/Ol			
Data			
Date	Payee name		
03/27/2023	Graham, Rita		
Amount (\$)	Payee address; City; State; Zip Code		
\$10.00	437 Bermuda Place		
Expenditure from			
corporate funds	Corpus Christi, TX 78411		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Loan Repayment/Reimbursement		
EXPENDITORE	Check if Austin, TX, officeholder living expense		
	Reimbursement for \$10.00 Refund from Square		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
experience to benefit eye			
Date	Payee name		
05/08/2023	Square, Inc.		
Amount (\$)	Payee address; City; State; Zip Code		
\$4.04	1455 Market Street		
	Unit 600		
Expenditure from corporate funds	San Francisco, CA 94103		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF	Fees Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Debit Card fee		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
oxponditate to beliefit oreit			

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officenolder/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/5 Rpt: 18/20	Nueces County Republican Women 00054336
4 Date	5 Payee name
06/12/2023	Square, Inc.
6 Amount (\$) \$1.83	7 Payee address; City; State; Zip Code 1455 Market Street
Expenditure from corporate funds	Unit 600 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Usage Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/14/2023	Square, Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$2.48	1455 Market Street
	Unit 600
Expenditure from corporate funds	San Francisco, CA 94103
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Square Usage fee
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/10/2023	Square, Inc.
Amount (\$) \$6.78 Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market Street Unit 600 San Francisco, CA 94103
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Debit Card Usage Fee
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ng Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

ent Solicitation/Fundraising Expense
se Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	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: 4/5 Rpt: 19/20	Nueces County Republican Women 00054336
4 Date	5 Payee name
03/22/2023	Texas Federation of Republican Women
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$100.00	P. O. Box 171146
Expenditure from corporate funds	Austin, TX 78717-0041
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Membership - Submission #3
	Membership Gushinsdidii ne
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	Para a same
Date	Payee name
03/03/2023	Texas Federation of Republican Women
Amount (\$)	Payee address; City; State; Zip Code
\$225.00	P. O. Box 171146
- Evenanditura from	
Expenditure from corporate funds	Austin, TX 78717-0041
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Membership Submission #4
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitie to benefit C/Oi	
Date	Payee name
04/24/2023	Texas Federation of Republican Women
Amount (\$)	Payee address; City; State; Zip Code
\$50.00	P. O. Box 171146
Expenditure from corporate funds	Austin, TX 78717-0041
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EAPENDITUKE	Check if Austin, TX, officeholder living expense
	Membership Submission #5
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorale to belieff C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Opnations Made By Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/5 Rpt: 20/20	Nueces County Republican Women 00054336
4 Date	5 Payee name
05/10/2023	Texas Federation of Republican Women
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$100.00	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 EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Membership Submission #6
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/16/2023	US Postmaster
Amount (\$)	Payee address; City; State; Zip Code
\$113.00	4801 Everhart Rd
Evponditure from	
Expenditure from corporate funds	Corpus Christi, TX 78411
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	P. O. Box Rental - 6 months
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	