### 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) 00083526	2 Total pages filed: 4		
3	COMMITTEE NAME			OFFICE USE ONLY		
	Washington Count	y Republican Women		Date Received ELECTRONICALLY FILED 07/01/2024		
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; CIT	TY; STATE; ZIP CODE			
	ADDRESS	P. O. Box 723		Date Hand-delivered or Date Postmarked		
	Change of Address					
		Brenham, TX 77834-0723		Receipt # Amount		
				Date Processed		
				Date Imaged		
5	CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Elisabeth		MI		
	NAME					
		NICKNAME LAST		SUFFIX		
		Eickhoff				
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY;	STATE; ZIP CODE		
	TREASURER STREET ADDRESS	7424 Rolling Creek Rd.				
	(Residence or Business)	Burton, TX 77835				
7	CAMPAIGN	STREET OR PO BOX;	APT / SUITE #; CITY	; STATE; ZIP CODE		
	TREASURER MAILING ADDRESS	7424 Rolling Creek Rd.				
	Change of Address	Burton, TX 77835				
8	CAMPAIGN TREASURER		EXTENSION			
	PHONE	(713) 855-8447				
9	REPORT TYPE	January 15 30	Oth day before election	Dissolution (Attach PAC-DR)		
			h day before election	10th day after campaign treasurer termination		
		X July 15	unoff	termination		
10	PERIOD COVERED	Month Day Year 02/25/2024 Tł	Month Day HROUGH 06/30/2024	Year 4		
11	ELECTION	ELECTION DATE				
		Month Day Year	Primary Runoff	Other		
			General Special			
	GO TO PAGE 2					
Fo	rms provided by Tex	xas Ethics Commission www.et	thics.state.tx.us	Version V4.1.0.d378aba0		

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME	13 Filer ID	(Ethics Commission Filers)				
Washington County Republican Women 0008			0008352	6		
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	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	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	583.00		
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	583.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	867.14		
	4. TOTAL POLITICA	L EXPENDITURES	\$	1,535.33		
CONTRIBUTION BALANCE			DAY \$	4,283.30		
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00		
16 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.						
Elisabeth Eickhoff						
		Signature of Car	mpaign Treas	surer		
AFFIX NOTARY	AFFIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said day						
of, 20, to certify which, witness my hand and seal of office.						
Signature of officer ad	ninistering oath	Printed name of officer administering oath	Title of of	ficer administering oath		
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.d378aba0		

### FORM GPAC COVER SHEET PG 3

3 of 4

17 COMMITT	(Ethics Commission Filers)		
Washing			
19 SCHEDUI NAME OF	SUBTOTAL AMOUNT		
1. X	1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	GANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	R	\$
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> 1,535.33
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		
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	\$

**SUBTOTALS - GPAC** 

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Food/Beverage Expense Polling y - Gift/Awards/Memorials Expense Printir	Repayment/Reimbursement Overhead/Rental Expense Expense g Expense es/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1 Total pages Schedule F1:	2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)				
Sch: 1/1 Rpt: 4/4	Washington County Republican Women		00083526				
4 Date	5 Payee name						
04/15/2024	Ant Street Inn						
6 Amount (\$) \$452.19	7 Payee address; City; State; Zip 107 W Commerce St	Code					
corporate funds	Brenham, TX 77833						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense Jgust Meeting Room Rental				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office s H	ought	Office held				
Date	Payee name						
04/25/2024	KWHI Radio						
Amount (\$)	Payee address; City; State; Zip	Code					
\$216.00	\$216.00 P. O. Box 1280						
corporate funds	Brenham, TX 77834						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		outside of Texas. Complete Schedule T. TX, officeholder living expense meetings				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office s H	sought	Office held				