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) 00054719 3 COMMITTEE NAME **OFFICE USE ONLY** Chambers County Republican Women Date Received **ELECTRONICALLY FILED** 07/15/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 519 Date Hand-delivered or Date Postmarked Change of Address Anahuac, TX 77514 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Rachal D. NAME NICKNAME LAST **SUFFIX** Hisler STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 367 Pipeyard Rd STREET **ADDRESS** #1575 (Residence or Business) Anahuac, TX 77514 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 1575 MAILING **ADDRESS** Anahuac, TX 77514 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 496-4681 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** 01/01/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/05/2024 General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Chambers County Repu	ıblican Women		00054719	
14 COMMITTEE ACTIVITY	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		
	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 IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,570.93
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	1,430.37
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	3,920.05
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.		
		Mrs. Rach	al D. Hisler	
		Signature of Car	mpaign Treasu	rer
AFFIX NOTARY	STAMP / SEAL ABOVE			
		, th	nis the	day
of	, 20, to certify \	which, witness my hand and seal of office.		
Signature of officer adr	ministering oath	Printed name of officer administering oath	Title of office	cer administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

3 of 15				
17 COMMITTE	EE NAME	18 Filer ID	(Ethics Commission	Filers)
Chambers	s County Republican Women	00054719	_	
	E SUBTOTALS SCHEDULE		SUBTOTAL AN	MOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,570.93
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 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.	9. SCHEDULE E: LOANS			
10. X	10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			1,430.37
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	\$	

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	SCHEDULE A1	
	The Instruction Guide explains how to complete this form.		1	Total pages Schedule A1: Sch: 1/7 Rpt: 4/15			
2	FILER NAME Chambers C	County Republican Women		3	Filer ID (Ethics Commission 00054719	n Filers)	
4	Date 01/04/2024			7	Amount of Contribution (\$)	\$50.00	
_	<u> </u>	WINNIE, TX 77665					
8	ACCOUNTA		9 Employer (See Instructions BUSCH SANDHOPP AN		BAKER		
Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$100.00		
	Principal occu	DAYTON, TX 77535 pation / Job title (See Instructions)	Employer (See Instructions)			
COUNTY ATTORNEY CHAMBERS COUNTY		,					
	Date 02/01/2024	Full name of contributor out-of-state PAC (ID#: CHAMBERS COUNTY GOP Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00	
		MONT BELVIEU, TX 77580					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 01/04/2024	Full name of contributor out-of-state PAC (ID#:_ COPELAND, WENDY Contributor address; City; State; Zip Code HANKAMER, TX 77560)		Amount of Contribution (\$)	\$20.00	
		pation / Job title (See Instructions) OF FIELD SERVICES	Employer (See Instructions NATURAL ENERGY FIE) SERVICES		
	Date 01/04/2024	Full name of contributor out-of-state PAC (ID#:_ CROFT, YVETTE Contributor address; City; State; Zip Code Baytown, TX 77523			Amount of Contribution (\$)	\$50.00	
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)			
		•					

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULI	E A1
	The Instru	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 2/7 Rpt: 5/15	
2	FILER NAME Chambers C	County Republican Women		3	Filer ID (Ethics Commission 00054719	n Filers)
4	Date 01/04/2024	5 Full name of contributor out-of-state PAC (ID#:_ FINCH, MYRNA 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00
_		STOWELL, TX 77661				
8	Principal occu RETIRED	pation / Job title (See Instructions)	9 Employer (See Instructions)		
Date Full name of contributor out-of-state PAC (ID#:) 01/04/2024 FISHER ROAD BAPTIST CHURCH Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$40.00	
	Principal occu	Baytown, TX 77523 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/04/2024	Full name of contributor out-of-state PAC (ID#: FOLTZ, KEVIN Contributor address; City; State; Zip Code ANAHUAC, TX 77514)		Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/04/2024	Full name of contributor out-of-state PAC (ID#:_ GLENN, VIOLETTA Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/04/2024	Full name of contributor out-of-state PAC (ID#:_ HART, BRADLEY Contributor address; City; State; Zip Code KINGWOOD, TX 77339			Amount of Contribution (\$)	\$20.00
	Principal occu ATTORNEY	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	LE A1	
	The Instru	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 3/7 Rpt: 6/15		
2	FILER NAME Chambers C	County Republican Women		3	Filer ID (Ethics Commission 00054719	n Filers)	
4	Date 01/04/2024	5 Full name of contributor out-of-state PAC (ID#:_ HEB 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$6.46	
_		Baytown, TX 77523					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))			
	Date 01/04/2024	Full name of contributor out-of-state PAC (ID#:_ HENNIGAN, REBA Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00	
		ANAHUAC, TX 77514					
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 03/07/2024	Full name of contributor out-of-state PAC (ID#:_ HENRY, CHERYL Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00	
		ANAHAUC, TX 77514					
	Principal occu DISTRICT A	pation / Job title (See Instructions) .TTORNEY	Employer (See Instructions CHAMBERS COUNTY)			
	Date 01/04/2024	Full name of contributor out-of-state PAC (ID#:_ HERRERA, KIM Contributor address; City; State; Zip Code ANAHUAC, TX 77514			Amount of Contribution (\$)	\$50.00	
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 01/04/2024	Full name of contributor out-of-state PAC (ID#:_HISLER, ANITA Contributor address; City; State; Zip Code ANAHUAC, TX 77514)		Amount of Contribution (\$)	\$85.00	
	Principal occu HOMEMAKE	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 4/7 Rpt: 7/15	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Chambers C	County Republican Women		L	00054719		
4	Date 02/01/2024	Full name of contributor HISLER, RACHAL Contributor address; City; St.	out-of-state PAC (ID#:ate; Zip Code)	7	Amount of Contribution (\$)	\$100.00
		Anahuac, TX 77514					
8		pation / Job title (See Instructions) 9	Employer (See Instructions		10	
	BOOKKEEP	ER		GEORGE W. HISLER II	, IN	VC.	
	Date 03/07/2024	Full name of contributor JOHNSON, CHRISTIAN Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
		DAYTON, TX 77535					
	Principal occu LAWYER	pation / Job title (See Instructions		Employer (See Instructions	5)		
	Date 01/04/2024	Full name of contributor JOHNSON, MARY Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$50.00
		MONT BELVIEU, TX 7752	23				
	Principal occu RETIRED	pation / Job title (See Instructions		Employer (See Instructions	<u> </u>		
	Date 03/07/2024	Full name of contributor JOHNSTON, CLAUDIA Contributor address; City; Sta)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions NT		Employer (See Instructions	5)		
	Date 03/07/2024	Full name of contributor KAHLA, RODNEY Contributor address; City; St. Anahuac, TX 77514	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu SHERIFF DI	pation / Job title (See Instructions		Employer (See Instructions	5)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 5/7 Rpt: 8/15		
2	FILER NAME Chambers County Republican Women			3	Filer ID (Ethics Commission 00054719	n Filers)	
4	Date 01/04/2024	5 Full name of contributor out-of-state PAC (ID#:_ LANE, DANA 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$40.00	
_	Duinning Langu	BAYTOWN, TX 77523	O Franks or (Cas Instructions				
8	RETIRED	pation / Job title (See Instructions)	9 Employer (See Instructions)			
Date Full name of contributor out-of-state PAC (ID#:) 01/04/2024 LEBLANC, SUSAN Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00			
	Dringing Lagge	ANAHUAC, TX 77597	Faralousy (Coolingtoustings)				
	RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 01/04/2024	Full name of contributor)		Amount of Contribution (\$)	\$50.00	
		Anahuac, TX 77514					
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 01/04/2024	Full name of contributor out-of-state PAC (ID#:_MCPHERSON, DARLENE Contributor address; City; State; Zip Code Anahuac, TX 77514)		Amount of Contribution (\$)	\$20.00	
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 04/15/2024	Full name of contributor out-of-state PAC (ID#:_PAYPAL Contributor address; City; State; Zip Code SAN JOSE, TX 95002)		Amount of Contribution (\$)	\$129.47	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 6/7 Rpt: 9/15		
2	FILER NAME Chambers C	ounty Republican Women		3	Filer ID (Ethics Commission 00054719	ı Filers)	
4	Date 01/04/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$35.00	
8	Principal occu	BAYTOWN, TX 77523 pation / Job title (See Instructions)	Employer (See Instructions				
•	ADMINISTR.		S Employer (See Instructions)			
Date Full name of contributor out-of-state PAC (ID#:) 01/04/2024 REDD, KELLI Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$50.00				
	Dringing oggu	BAYTOWN, TX 77523	Employer (See Instructions				
	COUNSELO	pation / Job title (See Instructions) R	Employer (See Instructions)			
	Date 01/04/2024	Full name of contributor out-of-state PAC (ID#:_ RENFRO, LISA Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00	
		ANAHUAC, TX 77514					
	Principal occu OFFICE MA	pation / Job title (See Instructions) NAGER	Employer (See Instructions)			
	Date 03/07/2024	Full name of contributor out-of-state PAC (ID#:_SHIPP, MICAELA Contributor address; City; State; Zip Code BAYTOWN, TX 77523			Amount of Contribution (\$)	\$50.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 02/01/2024	Full name of contributor out-of-state PAC (ID#:_WHITTINGTON, NICOLE Contributor address; City; State; Zip Code ANAHUAC, TX 77514			Amount of Contribution (\$)	\$50.00	
	Principal occu COUNTY TF	pation / Job title (See Instructions) REASURER	Employer (See Instructions CHAMBERS COUNTY)			

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/15
2	FILER NAME Chambers County Republican Women	3 Filer ID (Ethics Commission Filers) 00054719
4	Date 01/04/2024 5 Full name of contributor out-of-state PAC (ID#:	7 Amount of Contribution (\$) \$35.00
	GALVESTON, TX 77554	
8	Principal occupation / Job title (See Instructions) RETIRED 9 Employer (See Instructions)	tions)
	Date Full name of contributor out-of-state PAC (ID#:	Amount of Contribution (\$) \$20.00
	DEVERS, TX 77538 Principal occupation / Job title (See Instructions) RETIRED Employer (See Instructions)	ctions)

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 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

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: 1/5 Rpt: 11/15	Chambers County Republican Women 00054719
4 Date	5 Payee name
04/04/2024	BLAIR, DANIELLE
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$171.66	10023 MARY LANE
— Foreseditors from	
Expenditure from corporate funds	BAYTOWN, TX 77523
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 SUPPLIES
	SOLI ELES
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
Date	Davies same
	Payee name
05/02/2024	BOLLICH, SUSAN
Amount (\$)	Payee address; City; State; Zip Code
\$186.90	805 N HWY 1724
Expenditure from	
corporate funds	HANKAMER, TX 77560
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 FOOD/BEVERAGE
	POOD/BEVERAGE
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
D-1-	
Date	Payee name
01/04/2024	HEB
Amount (\$)	Payee address; City; State; Zip Code
\$107.06	13401 IH-10 EAST
Expenditure from	
corporate funds	MONT BELVIEU, TX 77523
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 FOOD/BEVERAGE
	FOOD/BEVERAGE
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

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/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: 12/15	Chambers County Republican Women 00054719
4 Date	5 Payee name
03/07/2024	HEB
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$136.25	13401 IH-10 EAST
Expenditure from corporate funds	MONT BELVIEU, TX 77523
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.
LAFLINDITORL	Check if Austin, TX, officeholder living expense
	FOOD/BEVERAGE
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/04/2024	HEB
Amount (\$)	Payee address; City; State; Zip Code
\$2.71	13401 IH-10 EAST
·	
Expenditure from corporate funds	MONT BELVIEU, TX 77523
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	FOOD/BEVERAGE
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payoo namo
	Payee name
04/04/2024	HEB
Amount (\$)	Payee address; City; State; Zip Code
\$128.98	13401 IH-10 EAST
Expenditure from corporate funds	MONT BELVIEU, TX 77523
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Figure 5. Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	FOOD/BEVERAGE
	1 303/32 10 102
Complete ONLY if allow	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
SAPORAMATO TO BOTTOM O/OI	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in 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: 3/5 Rpt: 13/15	Chambers County Republican Women 00054719
4 Date	5 Payee name
04/04/2024	HISLER, RACHEL
6 Amount (\$) \$111.94	7 Payee address; City; State; Zip Code PO BOX 1575
, , , , ,	
Expenditure from corporate funds	ANAHUAC, TX 77514
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.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	FOOD/BEVERAGE
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/07/2024	JOE V'S
Amount (\$)	Payee address; City; State; Zip Code
Amount (\$)	
\$14.24	GARTH ROAD
- Consortituos forces	
Expenditure from corporate funds	BAYTOWN, TX 77524
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
	FOOD/BEVERAGE
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/02/2024	LEBLANC, ANDREW
Amount (¢)	
Amount (\$)	
\$100.00	7134 FM 563
Expenditure from	
corporate funds	WALLISVILLE, TX 77597
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Event Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	SOUND
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							
1. Total pages Cabadula 51:							
1 Total pages Schedule F1:							
Sch: 4/5 Rpt: 14/15	Chambers County Republican Women 00054719						
4 Date	5 Payee name						
02/02/2024	MACEJEWSKI, DOTTIE						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$285.15	13303 FM1409						
Expenditure from	OLD RIVER, TX 77535						
corporate funds							
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
	FOOD/BEVERAGE						
	1005/5210102						
Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
01/04/2024	PAYPAL						
Amount (\$)	Payee address; City; State; Zip Code						
\$26.45	2211 NORTH 1ST STREET						
Expenditure from	SAN JOSE CA 05131						
corporate funds	SAN JOSE, CA 95131						
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 PROCESSING FEES						
	T NOOLSSING I LLS						
Complete CNII V if direct	Condidate/Officeholder name Office cought Office hold						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
,							
Date	Payee name						
03/07/2024	PAYPAL						
Amount (\$)	Payee address; City; State; Zip Code						
\$29.56	2211 NORTH 1ST STREET						
+==:00							
Expenditure from	CAN JOSE CA 05121						
corporate funds	SAN JOSE, CA 95131						
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 PROCESSING FEES						
	PROCESSING FEES						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
experiulture to beliefft C/OI							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politice Credit Card Payment	sy - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explair		nse es/Contract Labor		District t of District enter a category not listed above)	
4 Takal mana Cabadula 54.	la eu en man	•	13 HOW to comp		6 5115	(Ethios Commission Filoso)	
1 Total pages Schedule F1: Sch: 5/5 Rpt: 15/15		ı∟ County Republican Wome	≃n		3 Filer ID 000547	(Ethics Commission Filers)	
4 Date					000011		
04/04/2024	5 Payee nam PAYPAL	е					
6 Amount (\$)	7 Payee address; City; State; Zip Code 2211 NORTH 1ST STREET						
\$129.47	2211 NOR	TH 151 SIREET					
Expenditure from corporate funds	SAN JOSE	E, CA 95131					
8 PURPOSE	(a) Category	See Categories listed at the top of this s	schedule) (b)	Description			
OF EXPENDITURE		WRONG ACCOUNT CHARGED Check if travel outside of Texas. Complete Schedule T.					
EXI ENDITORE					, TX, officeholde		
				USED	FUNDED; \	WRONG ACCOUNT WAS	
				USLD			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		fficeholder name	Office sought		Offi	ce held	