

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers) 00081824	2 Total pages filed: 20	OFFICE USE ONLY	
3 COMMITTEE NAME Cameron County Republican Women			Date Received ELECTRONICALLY FILED 07/15/2024
4 TREASURER NAME Viader, Renae			Date Hand-delivered or Date Postmarked
5 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	Receipt #
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 10th day after campaign treasurer resignation	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution report	Amount
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Other (specify) _____	Date Processed
6 ORIGINAL PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	01/01/2024		06/30/2024
7 EXPLANATION OF CORRECTION			

7 EXPLANATION OF CORRECTION
 I noticed a receipt that I had not entered. I added it to the report. I submitted my report yesterday but noticed I missed a receipt. All in good faith. I request for a waiver since I caught it in time, submitted, and reported it prior to the deadline tonight. Thank you for understanding.

8 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.

Renae Viader

 Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this 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 officer administering oath

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

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00081824	2 Total pages filed: 20
3 COMMITTEE NAME Cameron County Republican Women		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/15/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 109 Red Crown Rd Bayview, TX 78566	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
		Renaë	
	NICKNAME	LAST	SUFFIX
		Viader	
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	5642 Sam Snead Dr. Harlingen, TX 78552		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
	5642 Sam Snead Dr. Harlingen, TX 78552		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(956)	893-3224	
9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution (Attach PAC-DR)
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> 10th day after campaign treasurer termination
	<input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	01/01/2024		06/30/2024
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year 07/13/2024	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff <input type="checkbox"/> Other
		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Cameron County Republican Women	13 Filer ID (Ethics Commission Filers) 00081824
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,160.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 8,048.16
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 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.

Renae Viader

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this 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 officer administering oath

SUBTOTALS - GPAC

17 COMMITTEE NAME Cameron County Republican Women		18 Filer ID (Ethics Commission Filers) 00081824
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,160.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 5,362.96
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/14 Rpt: 5/20
2 FILER NAME Cameron County Republican Women		3 Filer ID (Ethics Commission Filers) 00081824
4 Date 01/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Annette (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Harlingen, TX 78552	
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batterson, Earl (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78552	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batterson, Sharon (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78550	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Retired
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Deborah (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Brownsville, TX 78526	
Principal occupation / Job title (See Instructions) Cameron County Chairwoman		Employer (See Instructions) Self
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burden, Rebecca (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78552	
Principal occupation / Job title (See Instructions) Salon Owner		Employer (See Instructions) self employee

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/14 Rpt: 6/20
2 FILER NAME Cameron County Republican Women		3 Filer ID (Ethics Commission Filers) 00081824
4 Date 01/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkes, Brad (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Brownsville, TX 78520	
8 Principal occupation / Job title (See Instructions) Pastor		9 Employer (See Instructions) Pastor
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cabriaes, Marie	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78550	
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Sabrina	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78552	
Principal occupation / Job title (See Instructions) Deputy of State Director		Employer (See Instructions) State of Texas
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castellanos, Katie (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78550	
Principal occupation / Job title (See Instructions) Owner, Bright Beginnings		Employer (See Instructions) Self
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Anel (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Brownsville, TX 78526	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Manager

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/14 Rpt: 7/20
2 FILER NAME Cameron County Republican Women		3 Filer ID (Ethics Commission Filers) 00081824
4 Date 01/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Luis (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Brownsville, TX 78521	
8 Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) Student
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chamberlain, Dale Dillion (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Palm Valley, TX 78552	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chamberlain, Norlene (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78552	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Mary (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code San Benito, TX 78585	
Principal occupation / Job title (See Instructions) Retiree		Employer (See Instructions) Retiree
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deaton, Veronica (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Brownsville, TX 78521	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) N1A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/14 Rpt: 8/20
2 FILER NAME Cameron County Republican Women		3 Filer ID (Ethics Commission Filers) 00081824
4 Date 01/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunkin, Carolyn (Miss)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Laguna, TX 78578	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunkin, Doak (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78552	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunkin, Kendall (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Laguna Visra, TX 78578	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunkin, Robyn (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Laguna Vista, TX 78578	
Principal occupation / Job title (See Instructions) Merch Manager		Employer (See Instructions) Osprey Cruises
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elbert, Bonnie (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Brownsville, TX 78521	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/14 Rpt: 9/20
2 FILER NAME Cameron County Republican Women		3 Filer ID (Ethics Commission Filers) 00081824
4 Date 01/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Escamilla, Sylvia (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code South Padre Island, TX 78597	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esparza, Tania (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78552	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Reconnection Myofasial
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fedie, Brenda (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78550	
Principal occupation / Job title (See Instructions) Retiree		Employer (See Instructions) Retiree
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fedie, Norwood (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Mayra (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Los Indios, TX 78567	
Principal occupation / Job title (See Instructions) Registers Practice Therapy		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/14 Rpt: 10/20
2 FILER NAME Cameron County Republican Women		3 Filer ID (Ethics Commission Filers) 00081824
4 Date 01/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Felipe (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Harlingen, TX 78552	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) UTC
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Laura Lisa (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78552	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Mesquite Treatment Center
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Mary (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78552	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) UTC
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Mauro (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code San Antonio, TX 78212	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Angie (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78550-6634	
Principal occupation / Job title (See Instructions) Glass		Employer (See Instructions) Owner American Eagle Glass

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/14 Rpt: 11/20
2 FILER NAME Cameron County Republican Women		3 Filer ID (Ethics Commission Filers) 00081824
4 Date 01/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Reynaldo (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Harlingen, TX 78550	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 03/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Bill (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Brownsville, TX 78526	
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions) Self
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kitten, Marcia	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Harlingen, TX 78550	
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) AIM Media Texas
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lara, Lora (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Harlingen, TX 78552	
Principal occupation / Job title (See Instructions) Real Estate Appraiser		Employer (See Instructions) Retired
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lara, Victoria (Ms.)	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Harlingen, TX 78552	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) US Navy

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/14 Rpt: 12/20
2 FILER NAME Cameron County Republican Women		3 Filer ID (Ethics Commission Filers) 00081824
4 Date 01/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Jeneria (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Bayview, TX 78566	
8 Principal occupation / Job title (See Instructions) Manager of Analysis		9 Employer (See Instructions) Blackbeard's Inc.
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Lou (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Bayview, TX 78566	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Blackbeard's Inc.
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindquist, Isela (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78550	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Sales
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linquist, Stacey (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78550	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luckey, Kristin (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78550	
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Admin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/14 Rpt: 13/20
2 FILER NAME Cameron County Republican Women		3 Filer ID (Ethics Commission Filers) 00081824
4 Date 01/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Jennifer (Ms.)	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code Harlingen, TX 78552		
8 Principal occupation / Job title (See Instructions) Agent		9 Employer (See Instructions) Self
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Winifred (Ms.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Rancho Viejo, TX 78575		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Self Employee Anyway
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Brenda (Mrs.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Jesus (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Brownsville, TX 78526		
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNabb, Shelby (Ms.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Bayview, TX 78566		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/14 Rpt: 14/20
2 FILER NAME Cameron County Republican Women		3 Filer ID (Ethics Commission Filers) 00081824
4 Date 01/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padron, Eddie (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Brownsville, TX 78526	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Self
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Aaron (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Edinburg, TX 78539	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Attorney
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ponder, Loretta (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Los Fresnos, TX 78566	
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self Employed
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Puente, Priscilla (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Brownsville, TX 78526	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self Employed
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Christopher A (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Brownsville, TX 78526	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Central Square

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/14 Rpt: 15/20
2 FILER NAME Cameron County Republican Women		3 Filer ID (Ethics Commission Filers) 00081824
4 Date 01/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Maria (Mrs.)	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Harlingen, TX 78552	
8 Principal occupation / Job title (See Instructions) self		9 Employer (See Instructions) self
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santos, Gerardo (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Combes, TX 78535	
Principal occupation / Job title (See Instructions) Direct Core Worker		Employer (See Instructions) Compass Connections
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelander, Christie (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Harlingen, TX 78550	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Kenneth (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Harlingen, TX 78552-1866	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Minerva (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Harlingen, TX 78552-1866	
Principal occupation / Job title (See Instructions) Branch Manager		Employer (See Instructions) Fairway Independent Mortgage

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/14 Rpt: 16/20
2 FILER NAME Cameron County Republican Women		3 Filer ID (Ethics Commission Filers) 00081824
4 Date 01/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sirko, Melissa (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Harlingen, TX 78552	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Agent		9 Employer (See Instructions) Self
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smeltzer, Madonna (Mrs.) <hr/> Contributor address; City; State; Zip Code Laguna Vista, TX 78578	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Graciela (Mrs.) <hr/> Contributor address; City; State; Zip Code McAllen, TX 78502	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Manager
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sracy, Ida (Mrs.) <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78550	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommie, Buchen (Mrs.) <hr/> Contributor address; City; State; Zip Code Laguna Vista, TX 78578	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/14 Rpt: 17/20
2 FILER NAME Cameron County Republican Women		3 Filer ID (Ethics Commission Filers) 00081824
4 Date 01/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Toni L (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Rio Grande City, TX 78582	
8 Principal occupation / Job title (See Instructions) Hospitality		9 Employer (See Instructions) Self
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Viader, Renae	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78552	
Principal occupation / Job title (See Instructions) Owner Renew Med Spa		Employer (See Instructions) Self Employed
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Viader, Ricky (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78552	
Principal occupation / Job title (See Instructions) College Student		Employer (See Instructions) College Student
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vieh, Charles (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code San Benito, TX 78586	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Socorro (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harlingen, TX 78550	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/14 Rpt: 18/20
2 FILER NAME Cameron County Republican Women		3 Filer ID (Ethics Commission Filers) 00081824
4 Date 01/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Charles (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Port Isabel, TX 78578	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Self

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/2 Rpt:	2 FILER NAME Cameron County Republican Women	3 Filer ID (Ethics Commission Filers) 00081824
4 Date 05/23/2024	5 Payee name Aspen Design	
6 Amount (\$) 368.15 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip P.O. Box 3037 Annapolis, MD 21403	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Credit Card Payment	(b) Description (See instructions regarding type of information required.) Items
Date 01/20/2024	Payee name Hilton Garden Inn Harlingen Convention Center	
Amount (\$) 3,482.81 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 751 Harlingen Heights Dr Harlingen, TX 78552	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Forum event
Date 06/05/2024	Payee name Lara, Victoria (Miss)	
Amount (\$) 250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 22858 Burns Road Harlingen, TX 78552	
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.) Senior Scholarship recipient
Date 02/13/2024	Payee name TFRW	
Amount (\$) 177.10 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 171146 Austin, TX 78717-0041	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Credit Card Payment	(b) Description (See instructions regarding type of information required.) TFRW Organization

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/2 Rpt:	2 FILER NAME Cameron County Republican Women	3 Filer ID (Ethics Commission Filers) 00081824
4 Date 03/01/2024	5 Payee name TFRW	
6 Amount (\$) 354.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip PO Box 171146 Austin, TX 78717-0041	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Credit Card Payment	(b) Description (See instructions regarding type of information required.) TFRW Organization membership fees
Date 04/25/2024	Payee name TFRW	
Amount (\$) 379.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 171146 Austin, TX 78717-0041	
9 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Credit Card Payment	(b) Description (See instructions regarding type of information required.) TFRW Organization membership fees
Date 05/11/2024	Payee name TFRW	
Amount (\$) 101.20 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 171146 Austin, TX 78717-0041	
10 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Credit Card Payment	(b) Description (See instructions regarding type of information required.) TFRW Organization membership fees
Date 06/05/2024	Payee name Viader, Ricky (Mr.)	
Amount (\$) 250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5642 Sam Snead Dr Harlingen, TX 78552	
11 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.) Senior Scholarship recipient