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) 00055736 3 COMMITTEE NAME **OFFICE USE ONLY** Limestone County Republican Women PAC Date Received **ELECTRONICALLY FILED** 07/15/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 201 E. 7th St. Date Hand-delivered or Date Postmarked Change of Address Thornton, TX 76687 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Jeri Ann NAME NICKNAME LAST **SUFFIX** Penny STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 513 LCR 404 STREET **ADDRESS** (Residence or Business) Groesbeck, TX 76642 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 145 MAILING **ADDRESS** Groesbeck, TX 76642 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (254) 747-2905 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 Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE MANAGE			12 File: ID	(Ethios Commission Filer-)
2 COMMITTEE NAME	onublican Wares DAC		13 Filer ID	(Ethics Commission Filers)
	epublican Women PAC		00055736	
4 COMMITTEE ACTIVITY	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 Manauran	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.)			
			<u> </u>	
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	1,275.00
	2. TOTAL POLITICA			
	(OTHER THAN PLE	EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,525.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	127.73
	4. TOTAL POLITICA	L EXPENDITURES	\$	26,167.13
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		9,288.28
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			0.00
6 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Jeri An	n Penny	
		Signature of Ca	mpaign Treasu	irer
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ped before me, by the said _	, tl	nis the	day
		which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Litle of office	cer administering oath

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			3 of 7
17 COMMITTEE NAME Limestone County Reput	olican Women PAC	18 Filer ID 00055736	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1. X SCHEDULE A1	L: MONETARY POLITICAL CONTRIBUTIONS		\$ 1,525.00
2. SCHEDULE A2	2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B:	PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE C1 ORGANIZATIO	1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO NN)R	\$
5. SCHEDULE C2 LABOR ORGAI	2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA NIZATION	ATION OR	\$
6. SCHEDULE C3	3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7. SCHEDULE C4 ORGANIZATIO	4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR NN		\$
8. SCHEDULE D:	PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9. SCHEDULE E:	LOANS		\$
10. X SCHEDULE F1	L: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 26,167.13
11. SCHEDULE F2	2: UNPAID INCURRED OBLIGATIONS		\$
12. SCHEDULE F3	3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13. SCHEDULE F4	1: EXPENDITURES MADE BY CREDIT CARD		\$
14. SCHEDULE I: 1	NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15. SCHEDULE K: TO FILER	INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I	RETURNED	\$

MONET	TARY POLITICAL CONTRIBUTION	ΛC	IS		SCHEDULE A1
The Instruction Guide explains how to complete this form.			m.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/7
2 FILER NAME Limestone County Republican Women PAC				3	Filer ID (Ethics Commission Filers) 00055736
Date 02/20/2024	Full name of contributor	:		7	Amount of Contribution (\$) \$250.00
Principal occu	Bryan, TX 77805 upation / Job title (See Instructions)	9	Employer (See Instructions	 	
Rancher			Self	,	
	The Instru FILER NAME Limestone C Date 02/20/2024	The Instruction Guide explains how to complete this FILER NAME Limestone County Republican Women PAC Date 02/20/2024 5 Full name of contributor out-of-state PAC (ID#: Champion, Craig 6 Contributor address; City; State; Zip Code Bryan, TX 77805 Principal occupation / Job title (See Instructions)	The Instruction Guide explains how to complete this form FILER NAME Limestone County Republican Women PAC Date 02/20/2024 5 Full name of contributor out-of-state PAC (ID#: Champion, Craig 6 Contributor address; City; State; Zip Code Bryan, TX 77805 Principal occupation / Job title (See Instructions)	FILER NAME Limestone County Republican Women PAC Date 02/20/2024 Champion, Craig 6 Contributor address; City; State; Zip Code Bryan, TX 77805 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	The Instruction Guide explains how to complete this form. FILER NAME Limestone County Republican Women PAC Date 02/20/2024 Champion, Craig 6 Contributor address; City; State; Zip Code Bryan, TX 77805 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Finding Expense
Salaries/Memorials Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outpers extrapply not listed above)

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: 1/3 Rpt: 5/7	Limestone County Republican Women PAC 00055736
4 Date	5 Payee name
06/12/2024	Agnew, Charley
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	207 Man o War
Expenditure from corporate funds	Groesbeck, TX 76642
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Scholarship Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Scholarship
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete ONLY if direct expenditure to benefit C/OI	
Date	Payee name
04/02/2024	Going Ballistic
Amount (\$)	Payee address; City; State; Zip Code
\$4,432.20	P O Box 212
Expenditure from	
corporate funds	Streetman, TX 75859
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Donation Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Rifle Resistance Shield
	Kille Resistance Sillelu
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
01/25/2024	Limestone County Sherriff's Dept
Amount (\$)	Payee address; City; State; Zip Code
\$19,000.00	912 N Tyus
Expenditure from	
corporate funds	Groesbeck, TX 76642
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Donation Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Donation for Drone
	Donation for Drone
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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/Officenoider/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: 2/3 Rpt: 6/7	Limestone County Republican Women PAC 00055736
4 Date	5 Payee name
06/25/2024	St. Mark's Lutheran Church
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	2000 Clay
Expenditure from corporate funds	Waco, TX 76706
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Donation Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Blessing Bags
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiditure to beliefit C/O	
Date	Payee name
01/22/2024	TFRW
Amount (\$)	Payee address; City; State; Zip Code
\$75.90	13740 N Highway 183, Suite J4
Ψ13.30	13740 Willighway 103, June 34
Expenditure from corporate funds	Austin, TX 78717
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	other Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Dues
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
01/16/2024	TFRW
	Payee address; City; State; Zip Code
Amount (\$)	
\$75.90	13740 N Highway 183, Suite J4
Expenditure from	
corporate funds	Austin, TX 78717
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Dues Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Dues
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHEP (expense a category not 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: 3/3 Rpt: 7/7	Limestone County Republican Women PAC 00055736
4 Date	5 Payee name
02/20/2024	TFRW
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$177.10	13740 N Highway 183, Suite J4
Expenditure from corporate funds	Austin, TX 78717
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Dues Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Dues
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H
Date	Payee name
03/01/2024	TFRW
Amount (\$)	Payee address; City; State; Zip Code
\$278.30	13740 N Highway 183, Suite J4
Expenditure from corporate funds	Austin, TX 78717
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Dues Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H