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) 00055125 | | 2 Total pages filed: 36 |
|-----|-------------------------|---|--------|--|-----|--|
| 3 | COMMITTEE NAME | | | | | OFFICE USE ONLY |
| | Golden Triangle R | epublican Women | | | | |
| | - | | | | | |
| | | | | | | ELECTRONICALLY FILED |
| | | | | | | 10/27/2024 |
| 4 | COMMITTEE | ADDRESS / PO BOX; APT / SUITE #; CIT | Y; | STATE; ZIP CODE | | |
| | ADDRESS | P.O. Box 12902 | | | | Date Hand-delivered or Date Postmarked |
| | | | | | | |
| | Change of Address | Beaumont, TX 77706 | | | | Receipt # Amount |
| | | | | | | |
| | | | | | | Date Processed |
| | | | | | | |
| | | | | | | Date Imaged |
| | | | | | | - |
| 5 | CAMPAIGN | MS / MRS / MR FIRST | | | | MI |
| | TREASURER | Ms. Mary A. | | | | |
| | NAME | | | | | |
| | | NICKNAME LAST | | | | SUFFIX |
| | | Wickland | | | • | |
| | | Wickland | | | | |
| _ | CAMDAICN | | | | | |
| 6 | CAMPAIGN TREASURER | STREET ADDRESS (NO PO BOX PLEASE); | | APT / SUITE #; CIT | Y; | STATE; ZIP CODE |
| | STREET | 6370 Madera Ln | | | | |
| | ADDRESS | | | | | |
| | (Residence or Business) | Beaumont, TX 77706 | | | | |
| 7 | CAMPAIGN | STREET OR PO BOX; | | APT / SUITE #; CI | ΓY; | STATE; ZIP CODE |
| | TREASURER MAILING | 6370 Madera Ln | | | | |
| | ADDRESS | | | | | |
| | _ | Beaumont, TX 77706 | | | | |
| | Change of Address | | | | | |
| 8 | CAMPAIGN TREASURER | AREA CODE PHONE NUMBER | EXT | ENSION | | |
| | PHONE | (409) 656-0457 | | | | |
| | | | | | | |
| 9 | REPORT TYPE | January 15 30 |)th c | lay before election | | Dissolution (Attach PAC-DR) |
| | | | h da | y before election | | 10th day after campaign treasurer |
| | | July 15 | iii uu | | | termination |
| | | | unof | f | | |
| 10 | PERIOD | Month Day Year | | Month Day | , | Year |
| | COVERED | | IRC | DUGH 10/26/20 | | |
| | | | | | | |
| 11 | ELECTION | ELECTION DATE | | ELECTION TYPE | | |
| | | Month Day Year | rim | ary Runoff | | Other |
| | | 11/05/2024 | | | | |
| | | | Sene | eral Special | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | GO ⁻ | ГО | PAGE 2 | | |
| For | ms provided by Te | xas Ethics Commission www.et | hic | s.state.tx.us | | Version V4.1.0.48da51f7 |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

| 12 COMMITTEE NAME | | | 13 Filer ID | (Ethics Commission Filers) |
|---|---|--|--------------------------------------|--|
| Golden Triangle Repub | lican Women | | 00055125 | |
| 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 | \$ | 0.00 |
| | 2. TOTAL POLITICA (OTHER THAN PLE | L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 7,161.95 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED | POLITICAL EXPENDITURES | \$ | 237.13 |
| | 4. TOTAL POLITICA | L EXPENDITURES | \$ | 5,008.47 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL C OF THE REPORTING | CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD | DAY \$ | 76,499.18 |
| OUTSTANDING LOAN TOTALS | | AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 REPORTING PERIOD | THE \$ | 0.00 |
| 16 AFFIDAVIT | | I swear, or affirm, under penalty of pe true and correct and includes all inforr under Title 15, Election Code. | rjury, that the a nation required | accompanying report is d to be reported by me |
| | | Ms. Mary / | A. Wickland | |
| | | Signature of Car | mpaign Treasu | irer |
| AFFIX NOTARY | STAMP / SEAL ABOVE | | | |
| | | , tł | nis the | day |
| ot | _, 20, to certity v | which, witness my hand and seal of office. | | |
| Signature of officer ad | ministering oath | Printed name of officer administering oath | Title of offic | cer administering oath |
| Forms provided by Texas E | Ethics Commission | www.ethics.state.tx.us | | Version V4.1.0.48da51f7 |

FORM GPAC COVER SHEET PG 3

3 of 36

| 17 COMMITTE | EE NAME | 18 Filer ID | (Ethics Commission Filers) |
|-------------|--|--------------|----------------------------|
| Golden Tr | iangle Republican Women | 00055125 | |
| | E SUBTOTALS | | SUBTOTAL AMOUNT |
| NAME OF S | SCHEDULE | | |
| 1. X | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ 7,161.95 |
| 2. | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ |
| 3. | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ |
| 4. | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION | R | \$ |
| 5. | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION | TION 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 | 5 | \$ 5,008.47 |
| 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 | DNS | \$ |
| 15. | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER | RETURNED | \$ |
| | | | |

SUBTOTALS - GPAC

| | The Instru | ction Guide explains how to complet | te this fo | orm. | 1 | Total pages Schedule A1: Sch: 1/32 Rpt: 4/36 | |
|---|----------------|--|------------|---------------------------------------|----------------|---|-----------------|
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | ngle Republican Women | | | | 00055125 | |
| 4 | Date | 5 Full name of contributor out-of-state | PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 10/21/2024 | Adams, Jackson | | | | | \$35.00 |
| | | 6 Contributor address; City; State; Zip Code | | | 1 | | |
| | | | | | | | |
| | | | | | | | |
| | | Beaumont, TX 77706 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instructions | 5) | | |
| | Retired | | | Retired | | | |
| F | Date | Full name of contributor Out-of-state | PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 10/14/2024 | Adams, Jackson | | | | | \$35.00 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Beaumont, TX 77706 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u>ا</u> چ) | | |
| | Retired | · · · · · · · · · · · · · · · · · · · | | Retired | , | | |
| ╞ | Date | Full name of contributor out-of-state | |) | Г | Amount of Contribution (\$) | |
| | 10/18/2024 | Almquist, Sharon | PAC (ID# |) | | | \$36.32 |
| | 10/10/2024 | ······ | | | - | | Ψ30.32 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | Beaumont, TX 77707 | | | | | |
| | Princinal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> ເ) | | |
| | Teacher | | | Veritas Classical Acade | | , | |
| | | | | | , T | | |
| | Date | | PAC (ID#: |) | | Amount of Contribution (\$) | # 20,222 |
| | 10/15/2024 | | | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | Vidor, TX 77662 | | | | | |
| ┝ | Dringing ogg | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | RN, BS Reti | · · · · · · | | Employer (See Instructions Retired | >) | | |
| | | | | | _ | | |
| | Date | Full name of contributor out-of-state | PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 10/16/2024 | Arnold, Sheri | | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| L | | Beaumont, TX 77706 | | | Ĺ | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | Broker Com | mercial Real Estate | | Coldwell Banker Comm | erc | ial Arnold and Associates | |
| | | | | | | | |

| - | | | | | | | |
|---|----------------|--|---------|------------------------------|-----------|---|---------|
| | The Instru | ction Guide explains how to complete t | this fo | orm. | 1 | Total pages Schedule A1: Sch: 2/32 Rpt: 5/36 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Golden Triar | ngle Republican Women | | | | 00055125 | - |
| 4 | Date | 5 Full name of contributor out-of-state PAC | C (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 10/16/2024 | Arnold, Sheri | | | | | \$72.33 |
| | | 6 Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Beaumont, TX 77706 | | | | | |
| 8 | | pation / Job title (See Instructions) | 9 | 9 Employer (See Instructions | | | |
| | Commercial | Real Estate Broker | | Coldwell Banker Comm | erc | ial Arnold and Associates | |
| | Date | Full name of contributor out-of-state PAC | C (ID#: |) | | Amount of Contribution (\$) | |
| | 10/14/2024 | Ashrafi, Tony | | | | | \$35.00 |
| | | Contributor address; City; State; Zip Code | | | 1 | | |
| | | | | | | | |
| | | | | | | | |
| | | Beaumont, TX 77707 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Real Estate | | | Manifest Realty Group | | | |
| | Date | | C (ID#: |) | | Amount of Contribution (\$) | |
| | 10/15/2024 | Baldauf, Debra | | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | Beaumont, TX 77707 | | | | | |
| _ | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | Sales | | | Zone Industries | <i>''</i> | | |
| ╞ | Date | Full name of contributor out-of-state PAC | C (ID#) | | | Amount of Contribution (\$) | |
| | 10/15/2024 | Beard, Barbara | C (ID# |) | | | \$36.32 |
| | 10/10/2024 | | | | | | φ00.02 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | Beaumont, TX 77706 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | Librarian | | | City of Beaumont Public | : Li | brary System | |
| ⊨ | Date | Full name of contributor out-of-state PAC | C (ID#: |) | | Amount of Contribution (\$) | |
| | 09/29/2024 | Beard, Barbara | | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Beaumont, TX 77706 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| L | Librarian | | | City of Beaumont | | | |
| | | | | | | | |
| | | | | | | | |

| The Instru | ction Guide explains how to complete this f | iorm. | 1 Total pages Schedule A1: Sch: 3/32 Rpt: 6/36 |
|------------------|---|------------------------------|---|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | ngle Republican Women | | 00055125 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 10/11/2024 | Bell, Hester | | \$36. |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Beaumont, TX 77706 | | |
| 8 Principal occu | ipation / Job title (See Instructions) | 9 Employer (See Instructions | ;) |
| Realtor | | Re Max 1 | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 09/28/2024 | Bell, Hester | | \$36. |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Beaumont, TX 77706 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | ;) |
| Realtor | | ReMax 1 | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 10/15/2024 | Benoit, Debbie | | \$36. |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Port Neches, TX 77651 | | |
| Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | ;) |
| Retired | | Retired | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 10/15/2024 | BiJeaux, Denise | | \$72. |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Nederland, TX 77627 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | |
| Retired | | Retired | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 09/30/2024 | BiJeaux, Denise Walker | | \$72. |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Nederland, TX 77627 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions |) |
| Retired | | Retired | |
| | | | |

| _ | | | | | | |
|---|--------------------|---|--|----------|---|-----------------------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 4/32 Rpt: 7/36 | |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | ngle Republican Women | | | 00055125 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 10/16/2024 | Bordelon, Michael | | | | \$35.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| Ļ | | Nederland, TX 77627 | | | | |
| 8 | | upation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Self-Employe | | Bordelon construction | - | | |
| | Date | |) | | Amount of Contribution (\$) | |
| | 10/22/2024 | | | | | \$62.04 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Beaumont, TX 77706 | | | | |
| _ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Housewife | | Self employed | " | | |
| ╞ | Date | Full name of contributor Out-of-state PAC (ID#: | | <u> </u> | Amount of Contribution (\$) | |
| | Date 10/22/2024 | Brandimarte, Chelsea |) | | | \$36.32 |
| | 1012212027 | | | | | Ψ <u></u> υυ.υ ₂ |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Beaumont, TX 77706 | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | House Wife | | Self employed | | | |
| ╞ | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 10/14/2024 | Branham, Carol | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Port Neches, TX 77651 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Retired | | ExxonMobil | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 10/14/2024 | Branick, Jeff | | | | \$70.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Dart Machae TV 77651 | | | | |
| | Dringing oog | Port Neches, TX 77651 | Employer (Coo Instructions | | | |
| | County Judg | ipation / Job title (See Instructions) | Employer (See Instructions Jefferson County, Teas | 5) | | |
| ┡ | | ,c | | | | |
| | | | | | | |

| The Instru | ction Guide explains how to complete this f | form. | 1 Total pages Schedule A1: Sch: 5/32 Rpt: 8/36 | |
|------------------|--|------------------------------|---|-------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers | s) |
| | ngle Republican Women | | 00055125 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) | |
| 10/23/2024 | Broussard, Steven | | \$30 | 36.32 |
| | 6 Contributor address; City; State; Zip Code | | 1 | |
| | | | | |
| | Port Neches, TX 77651 | | | |
| 8 Principal occu | I upation / Job title (See Instructions) | 9 Employer (See Instructions | 1 s) | |
| Law Enforce | | Tiki Island Police Depar | | |
| Date | Full name of contributor Out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 09/30/2024 | Broussard, Steven | | | 36.32 |
| | | | | |
| | | | | |
| | | | | |
| | Port Neches, TX 77651 | | | |
| - | upation / Job title (See Instructions) | Employer (See Instructions | 3) | |
| Peace Office | ۶r | Tiki Island | | |
| Date | Full name of contributor Out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 10/14/2024 | Brown, Janet | | \$3! | 35.00 |
| | Contributor address; City; State; Zip Code | | 1 | |
| | | | | |
| | Port Neches, TX 77651 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | |
| Director of C | | US House of Represent | tatives | |
| Date | Full name of contributor Out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 10/20/2024 | Brown, Janet J | | | 36.32 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Port Neches, TX 77651 | | | |
| - | upation / Job title (See Instructions) | Employer (See Instructions | | |
| Casework D | irector | US House of Represent | tatives | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 10/14/2024 | Brown, Lanie | | \$70 | 70.00 |
| | Contributor address; City; State; Zip Code | | 1 | |
| | | | | |
| | | | | |
| | West Orange, TX 77630 | <u> </u> | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | | |
| Sr. Field Dire | | US Rep Brian Babin TX | -30 | |
| | | | | |

| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 6/32 Rpt: 9/36 | |
|-----|----------------|--|------------------------------|----------------|---|--------------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Golden Triar | ngle Republican Women | | 1 | 00055125 | |
| 4 | Date | 5 Full name of contributor Dut-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| | 10/13/2024 | Brown, Linda | | | | \$35.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Port Neches, TX 77651 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | <u> </u> s) | | |
| | Retired | · · · · · · · · · · · · · · · · · · · | Retired | , | | |
| ⊨ | Date | Full name of contributor out-of-state PAC (ID#: |) | Г | Amount of Contribution (\$) | |
| | 10/14/2024 | Brown, Lyn |) | | | \$36.32 |
| | | | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Beaumont, TX 77708 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Retired | | LIT | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Ι | Amount of Contribution (\$) | |
| | 10/14/2024 | Cameron, Corma | | | | \$70.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Beaumont, TX 77706 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Retired | | Retired | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | * *** |
| | 10/15/2024 | Carr, Dina | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Beaumont, TX 77705 | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Retired | | Retired | | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | Γ | Amount of Contribution (\$) | |
| | 10/15/2024 | Carroll, Kate | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Beaumont, TX 77713 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | S) | | |
| | Investments | | Bevilport LLC | | | |
| | | | | | | |
| I I | | | | | | |

| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 7/32 Rpt: 10/36 |
|--|--|
| 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Golden Triangle Republican Women | 00055125 |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#: |) 7 Amount of Contribution (\$) |
| 10/15/2024 Carroll, Kate | \$36.32 |
| 6 Contributor address; City; State; Zip Code | |
| | |
| | |
| Beaumont, TX 77713 | |
| | (See Instructions) |
| Investments Bevilport | |
| Date Full name of contributor out-of-state PAC (ID#: | |
| 10/15/2024 Cavett, Marcia | \$36.32 |
| Contributor address; City; State; Zip Code | |
| | |
| | |
| Beaumont, TX 77707 | |
| | (See Instructions) |
| Homemaker Self | |
| Date Full name of contributor out-of-state PAC (ID#: | |
| 10/23/2024 Christensen, Mary | \$36.32 |
| Contributor address; City; State; Zip Code | |
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| Decument TV 77706 | |
| Beaumont, TX 77706 | |
| Principal occupation / Job title (See Instructions) Employer Retiree NA | (See Instructions) |
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| Date Full name of contributor out-of-state PAC (ID#: | |
| 10/23/2024 Christensen, Mary | \$36.32 |
| Contributor address; City; State; Zip Code | |
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| Beaumont, TX 77706 | |
| | (See Instructions) |
| Retiree NA | |
| | A required of Operativity tion (ft) |
| Date Full name of contributor out-of-state PAC (ID#: |) Amount of Contribution (\$) \$36.32 |
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| Contributor address; City; State; Zip Code | |
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| Beaumont, TX 77707 | |
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| | The Instru | ction Guide explains how to complete this | form. | 1 Total pages Schedule A1: Sch: 8/32 Rpt: 11/36 | |
| 2 | FILER NAME | | | 3 Filer ID (Ethics Commission Filers) | |
| | | ngle Republican Women | | 00055125 | |
| 4 | Date | 5 Full name of contributor Out-of-state PAC (ID# | t:) | 7 Amount of Contribution (\$) | |
| | 10/23/2024 | Conway, Nancy | | \$36. | .32 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | |
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| | | Deciment TV 77706 | | | |
| Ļ | Dringinal occu | Beaumont, TX 77706 | Employer (Soo Instruction) | | |
| ° | Accountant | ipation / Job title (See Instructions) | 9 Employer (See Instructions Lower Neches Valley Al | | |
| ╘ | | | | | _ |
| | Date | | #:) | Amount of Contribution (\$) | 22 |
| | 09/27/2024 | | | \$36. | .32 |
| | | Contributor address; City; State; Zip Code | | | |
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| | | Beaumont, TX 77706 | | | |
| ┝ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | |
| | Accountant | | Lower Neches Valley A | | |
| ╞ | Date | Full name of contributor Out-of-state PAC (ID# | | Amount of Contribution (\$) | _ |
| | 10/16/2024 | Cook, Vicki | / | \$72. | .33 |
| | 10,20,20 | | | · · · | |
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| | | Beaumont, TX 77707 | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | |
| | Retired | | CEO Beaumont Commu | unity CU | |
| | Date | Full name of contributor out-of-state PAC (ID# | ;) | Amount of Contribution (\$) | |
| | 09/30/2024 | Coronado, Tiffany | | \$36. | .32 |
| | | Contributor address; City; State; Zip Code | | 1 | |
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| | | | | | |
| | <u> </u> | Beaumont, TX 77707 | | <u> </u> | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions | | |
| | Chiropractor | | Thrive Family Chiroprac | | |
| | Date | Full name of contributor out-of-state PAC (ID# | t:) | Amount of Contribution (\$) | ~ ~ |
| | 10/16/2024 | Courville, Barbara | | \$70. | .00 |
| | | Contributor address; City; State; Zip Code | | | |
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| | | Beaumont, TX 77707 | | | |
| ┝ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | e) | |
| | Therapist | | Samaritan Counseling C | | |
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| 6 Contributor address; City; State; Zip Code Beaumont, TX 77707 Pemployer (See Instructions) 7 Therapist Date Full name of contributor 10/15/2024 Full name of contributor Contributor address; City; State; Zip Code Amount of Contribution (\$) Contributor address; City; State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Therapist Samaritan Counseling Center of SETX Pate Full name of contributor out-of-state PAC (ID#: Principal occupation / Job title (See Instructions) Employer (See Instructions) Samaritan Counseling Center of SETX Date Full name of contributor out-of-state PAC (ID#: | The Instruction Guide explains how to complete this form. Sch: 9/32 Rpt: 12/36 2 FillER NAME Golden Triangle Republican Women 3 Filer ID (Ethics Commission Filers) 00055125 4 Date 5 Full name of contributor out-of-state PAC (D#) 7 Amount of Contribution (\$) 10/16/2024 6 Contributor address; City, State; Zip Code 7 Amount of Contribution (\$) 8 Principal occupation / Job title (See Instructions) Therapist 9 Employer (See Instructions) Samaritan Counseling Center of SETX Date Full name of contributor out-of-state PAC (D#) Amount of Contribution (\$) 10/15/2024 Four name of contributor out-of-state PAC (D#) Amount of Contribution (\$) 10/15/2024 Full name of contributor out-of-state PAC (D#) Amount of Contribution (\$) 10/15/2024 Full name of contributor out-of-state PAC (D#) Amount of Contribution (\$) 10/15/2024 Full name of contributor out-of-state PAC (D#) Amount of Contribution (\$) 10/15/2024 Full name of contributor out-of-state PAC (D#) Amount of Contribution (\$) 10/15/2024 Full name of contributor | The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1 | |
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| Beaumont, TX 77713 Employer (See Instructions) Retired Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Date Full name of contributor on out-of-state PAC (ID#:) Crutchfield, Rosalie Amount of Contribution (\$) 10/14/2024 Crutchfield, Rosalie \$35.0 Contributor address; City; State; Zip Code Beaumont, TX 77706 Principal occupation / Job title (See Instructions) Employer (See Instructions) | Contributor address; City; State; Zip Code Beaumont, TX 77706 Principal occupation / Job title (See Instructions) Employer (See Instructions) | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired Date 10/14/2024 | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 Ipation / Job title (See Instructions) Full name of contributor | Employer (See Instructions) Samaritan Counseling Co) Employer (See Instructions) Retired | enter of SETX Amount of Contribution (\$) Amount of Contribution (\$) | \$300.00 |
| Beaumont, TX 77713 | | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | |
| Beaumont, TX 77713 Principal occupation / Job title (See Instructions) Employer (See Instructions) | Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | |
| Beaumont, TX 77713 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired | | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 Ipation / Job title (See Instructions) | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | |
| Beaumont, TX 77713 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired | | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 Ipation / Job title (See Instructions) | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | |
| Beaumont, TX 77713 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired | 10/14/2024 Crutchfield, Rosalie \$35.00 | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 Ipation / Job title (See Instructions) | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | |
| Beaumont, TX 77713 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#:) | | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired Date | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 upation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 upation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | \$300.00 |
| Beaumont, TX 77713 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#:) | | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired Date | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 upation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 upation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | \$300.00 |
| Beaumont, TX 77713 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#:) | | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired Date | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 upation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 upation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | \$300.00 |
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| Beaumont, TX 77713 Employer (See Instructions) Retired Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) 10/14/2024 Crutchfield, Rosalie Amount of Contribution (\$) \$35.0 | | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired Date | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crutchfield, Rosalie | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | \$300.00 |
| Beaumont, TX 77713 Employer (See Instructions) Retired Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) 10/14/2024 Crutchfield, Rosalie Amount of Contribution (\$) \$35.0 | | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired Date | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crutchfield, Rosalie | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | \$300.00 |
| Beaumont, TX 77713 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) 10/14/2024 Amount of Contribution (\$) \$35.0 | | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired Date | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crutchfield, Rosalie | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | \$300.00 |
| Beaumont, TX 77713 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#:) 10/14/2024 Crutchfield, Rosalie \$35.0 | | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired Date | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crutchfield, Rosalie | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | \$300.00 |
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| Beaumont, TX 77713 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#:) 10/14/2024 Crutchfield, Rosalie \$35.0 | | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired Date | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crutchfield, Rosalie | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | \$300.00 |
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| Beaumont, TX 77713 Employer (See Instructions) Retired Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) 10/14/2024 Crutchfield, Rosalie \$35.0 | | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired Date | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 upation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 upation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crutchfield, Rosalie | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | \$300.00 |
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| Beaumont, TX 77713 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) 10/14/2024 Amount of Contribution (\$) \$35.0 | | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired Date | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crutchfield, Rosalie | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | \$300.00 |
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| Beaumont, TX 77713 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) 10/14/2024 Amount of Contribution (\$) \$35.0 | | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired Date | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 Ipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crutchfield, Rosalie | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | \$300.00 |
| Beaumont, TX 77713 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#:) 10/14/2024 Crutchfield, Rosalie Contributor address; City; State; Zip Code Amount of Contribution (\$) | Contributor address; City; State; Zip Code | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired Date | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 apation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Joy Contributor address; City; State; Zip Code Beaumont, TX 77713 apation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Crutchfield, Rosalie Contributor address; City; State; Zip Code | Employer (See Instructions) Samaritan Counseling Co | enter of SETX Amount of Contribution (\$) | \$300.00 |
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| Beaumont, TX 77713 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#:) 10/14/2024 Crutchfield, Rosalie Amount of Contribution (\$) Contributor address; City; State; Zip Code S35.0 Beaumont, TX 77706 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) | Contributor address; City; State; Zip Code Beaumont, TX 77706 Principal occupation / Job title (See Instructions) Employer (See Instructions) | Date 10/15/2024 Principal occu Therspist Date 10/13/2024 Principal occu Retired Date 10/14/2024 | Courville, Barbara Contributor address; City; State; Zip Code Beaumont, TX 77707 Ipation / Job title (See Instructions) Full name of contributor | Employer (See Instructions) Samaritan Counseling Co) Employer (See Instructions) Retired | enter of SETX Amount of Contribution (\$) Amount of Contribution (\$) | \$300.00 |

| | The Instru | ction Guide explains how to complete this | form. | | Total pages Schedule A1: Sch: 10/32 Rpt: 13/36 | |
|---|---------------------------|--|---|----|---|----------------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | ngle Republican Women | | | 00055125 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID# |) | 7 | Amount of Contribution (\$) | |
| | 10/23/2024 | DELONEY, RUTH | | | | \$36.32 |
| | | 6 Contributor address; City; State; Zip Code | | " | | |
| | | BEAUMONT, TX 77706 | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions Retired | s) | | |
| ⊨ | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 10/15/2024 | Decuir, Frances | / | | () | \$36.32 |
| | _0,_0,_0_ | | | · | | +0010 <u>-</u> |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Lumberton, TX 77657 | i | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Self | | Self | | | |
| | Date | Full name of contributor out-of-state PAC (ID# |) | | Amount of Contribution (\$) | |
| | 09/27/2024 | Decuir, Frances Carole | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Lumberton, TX 77657 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Therapist | | Self | | | |
| ╞ | Date | Full name of contributor out-of-state PAC (ID#: | <u> </u> | | Amount of Contribution (\$) | |
| | 10/12/2024 | Dennis, June White | / | | () | \$72.33 |
| | | Contributor address; City; State; Zip Code | | · | | |
| | | Contributor address, City, State, Zip Code | | | | |
| | | | | | | |
| | | Beaumont, TX 77706 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Retired Educ | cator | Beaumont ISD | | | |
| ╞ | Date | Full name of contributor out-of-state PAC (ID#: | <u> </u> | | Amount of Contribution (\$) | |
| | 10/15/2024 | Dishman, Cindy | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | · | | |
| | | | | | | |
| | | | | | | |
| | | Beaumont, TX 77706 | | | | |
| ⊢ | Principal occu | n pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Retired | · · · | NA | | | |
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|---|-------------|---|------------------------------|---|
| | The Instru | ction Guide explains how to complete this | form. | 1 Total pages Schedule A1: Sch: 11/32 Rpt: 14/36 |
| 2 | FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | | ngle Republican Women | | 00055125 |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| | 10/22/2024 | Duhon, Patricia | | \$70.00 |
| | | 6 Contributor address; City; State; Zip Code | | |
| | | | | |
| | | | | |
| | | Beaumont, TX 77706 | | |
| 8 | | pation / Job title (See Instructions) | 9 Employer (See Instructions | is) |
| | Retired | | Retired | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 10/15/2024 | Elliott, Betty | | \$35.00 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | | | |
| | | Nederland, TX 77627 | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | is) |
| | Retired | | Retired | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 09/29/2024 | FARACI, Andrea | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | | | |
| | | BEAUMONT, TX 77705 | 1 | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | is) |
| | Business Ov | vner | Dominick Faraci AC | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 10/21/2024 | Farris, Janie | | \$35.00 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | | | |
| | | Kountze, TX 77625 | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | IS) |
| | Retired | | Retired | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 09/30/2024 | Farris, Janie | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | | | |
| | | Kountze, TX 77625 | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | is) |
| | Retired | | Walker County | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 12/32 Rpt: 15/36 |
|----------|----------------|---|------------------------------|---|
| 2 | FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | | ngle Republican Women | | 00055125 |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| | 10/15/2024 | Faske, Sheila | | \$36.32 |
| | | 6 Contributor address; City; State; Zip Code | | |
| | | | | |
| | | | | |
| | | Rose City, TX 77662 | | |
| 8 | | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) |
| | Office mana | ger | American Office LLC | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 10/21/2024 | Franks, Judy | | \$35.00 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | | | |
| | | Beaumont, TX 77713 | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) |
| | Retired | | Retired | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 10/18/2024 | Glass, Diane | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | | | |
| | | Beaumont, TX 77707 | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 3) |
| | Retired | | Retired | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 10/15/2024 | Goodman, Sherilyn | | \$35.00 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | | | |
| | | Beaumont, TX 77707 | I | - |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) |
| | Retired | | NA | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 09/30/2024 | Halbert, Lori | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | | | |
| \vdash | <u> </u> | Groves, TX 77619 | | Į |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) |
| | Retired | | Retired | |
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| The Instruc | ction Guide explains how to complete this | form. | 1 Total pages Sche Sch: 13/32 Rpt: | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics | Commission Filers) |
| | gle Republican Women | | 00055125 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID# | ¥:) | 7 Amount of Contrib | oution (\$) |
| 10/15/2024 | Harper, Cheryl | | | \$72.33 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | Port Nechas, TX 77651 | | | |
| 8 Principal occup | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | |
| Retired | | Retired | | |
| Date | Full name of contributor Out-of-state PAC (ID; | #:) | Amount of Contrib | oution (\$) |
| 10/22/2024 | Harper, Sonja | // | | \$37.34 |
| 10/22/2024 | | | | φ01.0 4 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Orange, TX 77630 | _ | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | |
| Retired RDH | | Dr Weaver | | |
| Date | Full name of contributor Out-of-state PAC (ID# | +:) | Amount of Contrib | oution (\$) |
| 10/15/2024 | Harrison, Rebecca | / | | \$36.32 |
| | Contributor address; City; State; Zip Code | | | |
| | Contributor address, City, State, Zip Code | | | |
| | | | | |
| | Beaumont, TX 77706 | | | |
| Dringingloggy | | Employer (Cap Instructions | N | |
| | pation / Job title (See Instructions) | Employer (See Instructions PAISD |) | |
| Retired teach | | PAISD | | |
| Date | Full name of contributor out-of-state PAC (ID# | #:) | Amount of Contrib | oution (\$) |
| 10/07/2024 | Hartel, Noeline | | | \$36.32 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Beaumont, TX 77707 | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | |
| Retired RN | | None | , | |
| Data | | | | |
| Date | Full name of contributor out-of-state PAC (ID# | #:) | Amount of Contrib | |
| 10/15/2024 | Henderson, Elaine | | | \$144.36 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Beaumont, TX 77726 | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | |
| Partner | | UCB | | |
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| how to complete this | form. | 1 Total pages Schedule A1: Sch: 14/32 Rpt: 17/36 | |
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| | | 3 Filer ID (Ethics Commission | Filers) |
| I. | | 00055125 | |
| or out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) | |
| | | | \$36.32 |
| City; State; Zip Code | | | |
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| 57 | | | |
| uctions) | | s) | |
| | Christus St. Elizabeth | | |
| or out-of-state PAC (ID#: | :) | Amount of Contribution (\$) | |
| | | | \$36.32 |
| City; State; Zip Code | | • | |
| | | | |
| | | | |
| 57 | | | |
| uctions) | Employer (See Instructions | s) | |
| | Christus St. Elizabeth | | |
| or out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| — | | | \$36.32 |
| City; State; Zip Code | | | |
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| 9 | | | |
| uctions) | Employer (See Instructions | s) | |
| | Remax on the water | | |
| or out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| — | | | \$36.32 |
| City; State; Zip Code | | | |
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| uctions) | Employer (See Instructions | s) | |
| | ReMax on the Water | | |
| or out-of-state PAC (ID#: | | Amount of Contribution (\$) | |
| | | | \$36.32 |
| City; State; Zip Code | | | |
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| 57 | | | |
| uctions) | Employer (See Instructions | s) | |
| | Retired | | |
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| | orout-of-state PAC (ID#: City; State; Zip Code 57 Jections) orout-of-state PAC (ID#: City; State; Zip Code 57 Jections) orout-of-state PAC (ID#: City; State; Zip Code 9 Jections) orout-of-state PAC (ID#: City; State; Zip Code 9 Jections) | or out-of-state PAC (ID#: | Sch: 14/32 Rpt: 17/36 3 Filer ID (ctions) Image: Sch: 14/32 Rpt: 17/36 (out-of-state PAC (ID#: |

| The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 15/32 Rpt: 18/36 |
|----------------|---|---------------------------------------|---|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | ngle Republican Women | | 00055125 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 10/23/2024 | James, Suzanne | | \$36.3 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Beaumont, TX 77705 | | |
| - | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) |
| RN | | PRN Medical | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 09/27/2024 | James, Suzanne | | \$36.3 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Beaumont, TX 77705 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 6) |
| RN | | PRN Medical | |
| Date | Full name of contributor out-of-state PAC (ID#: | ·) | Amount of Contribution (\$) |
| 10/20/2024 | Jones, Ann | | \$36.3 |
| | Contributor address; City; State; Zip Code | | • |
| | | | |
| | | | |
| | Beaumont, TX 77707 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) |
| Instructor | | BISD | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 10/18/2024 | Jones, Janet | | \$36.3 |
| | Contributor address; City; State; Zip Code | | • |
| | | | |
| | | | |
| | Beaumont, TX 77706 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) |
| Retired | | NA | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 09/29/2024 | Jones, Mary Pat | · · · · · · · · · · · · · · · · · · · | \$36.3 |
| | Contributor address; City; State; Zip Code | | • |
| | | | |
| | | | |
| | Beaumont, TX 77706 | | |
| Principal occu | I pation / Job title (See Instructions) | Employer (See Instructions | 5) |
| СРА | | Lawrence Blackburn Me | |
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| The Instru | iction Guide explains how to complete this f | orm. | 1 | Fotal pages Schedule A1: Sch: 16/32 Rpt: 19/36 | |
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| 2 FILER NAME | | | | Filer ID (Ethics Commission | Filers) |
| | ngle Republican Women | | | 00055125 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 / | Amount of Contribution (\$) | |
| 10/16/2024 | | | | | \$35.00 |
| | 6 Contributor address; City; State; Zip Code | | " | | |
| | | | | | |
| | Requirement TV 77706 | | | | |
| Principal occu | Beaumont, TX 77706 upation / Job title (See Instructions) | 9 Employer (See Instructions | <u> </u> | | |
| Retired loca | | United Methodist Churc | | | |
| | · | | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 10/14/2024 | | | | | \$35.00 |
| | Contributor address; City; State; Zip Code | | | | |
| | | | | | |
| | Beaumont, TX 77706 | | | | |
| Dringingloog | upation / Job title (See Instructions) | Employer (See Instructions | | | |
| Retired Past | | Employer (See Instructions Retired | 5) | | |
| | | | <u> </u> | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | ^ | Amount of Contribution (\$) | +70.00 |
| 10/22/2024 | Kieschnick, Brandy | | | | \$72.33 |
| | Contributor address; City; State; Zip Code | | | | |
| | | | | | |
| | Nederland, TX 77627 | | | | |
| Dringinglagg | | Employer (Cap Instructions | <u> </u> | | |
| Staffing Rec | upation / Job title (See Instructions) | Employer (See Instructions Complete Staffing | 5) | | |
| | | | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 09/30/2024 | Kiser, Brandon | | | | \$36.32 |
| | Contributor address; City; State; Zip Code | | | | |
| | | | | | |
| | Houston, TX 77084 | | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| Deputy Dist | | Senator Brandon Creigh | | | |
| Date | | , , , , , , , , , , , , , , , , , , , | | Amount of Contribution (\$) | |
| 10/24/2024 | |) | ' | | \$35.00 |
| 10/24/2024 | ······ | | | | φ33.00 |
| | Contributor address; City; State; Zip Code | | | | |
| | | | | | |
| | Beaumont, TX 77708 | | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| Retired | | Retired | -, | | |
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| The Instruc | ction Guide explains how to complete this fo | orm. | 1 Total pages Schedule A1: Sch: 17/32 Rpt: 20/36 | |
|-------------------|---|------------------------------|---|----------------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission I | Filers) |
| | ngle Republican Women | | 00055125 | , |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) | |
| 10/20/2024 | LeBlanc, Betty | | | \$46.61 |
| | 6 Contributor address; City; State; Zip Code | | 1 | |
| | | | | |
| | | | | |
| | Beaumont, TX 77713 | | | |
| | | 9 Employer (See Instructions | 3) | |
| insurance ag | jent | self | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 10/24/2024 | Licatino, Diana | | | \$35.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Port Arthur, TX 77640 | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 1 | |
| Retired | · · · · | Retired | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 10/17/2024 | Liebel, Laurie | / | | \$36.32 |
| 10/11/202 . | | | 4 | Ψ00.02 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Sour Lake, TX 77659 | | | |
| Principal occur | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | |
| accounting | | SETMA | <i>י</i> ן | |
| | | | 1 Amount of Constribution (ft) | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | * 00 00 |
| 10/17/2024 | Lightfoot, Leslie | | | \$36.32 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Decument TV 77707 | | | |
| Duite size Lessur | Beaumont, TX 77707 | | Į | |
| | ipation / Job title (See Instructions) | Employer (See Instructions | | |
| Contractor/In | | DURA-STEEL Buildings | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 10/15/2024 | Lively, Angie | | | \$36.32 |
| | Contributor address; City; State; Zip Code | | 1 | |
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| | | | | |
| | Beaumont, TX 77713 | | | |
| Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | 5) | |
| Retired | | Self | | |
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| The Instru | ction Guide explains how to comple | ete this form. | 1 Total pages Schedu Sch: 18/32 Rpt: 2 | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Co | |
| | igle Republican Women | | 00055125 | |
| 4 Date | 5 Full name of contributor out-of-state | e PAC (ID#: | 7 Amount of Contribut | ion (\$) |
| 10/24/2024 | Lough, Betty | | | \$35.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Port Neches, TX 77651 | | | |
| 8 Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instruct Retired | ions) | |
| Date | Full name of contributor out-of-state | e PAC (ID#: | Amount of Contribut | ion (\$) |
| 10/14/2024 | Lough, Betty | | | \$35.00 |
| | Contributor address; City; State; Zip Code | | | |
| | Contributor address, City, State, Zip Code | | | |
| | | | | |
| | Port Neches, TX 77651 | | | |
| Dringing ogg | | Employer (See Instruc | ione) | |
| Retired | pation / Job title (See Instructions) | Employer (See Instruc Retired | ions) | |
| Retileu | | Retireu | | |
| Date | | e PAC (ID#: | Amount of Contribut | |
| 10/20/2024 | MacKenzie, Elizabeth | | | \$180.38 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Beaumont, TX 77707 | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruc | ions) | |
| Retired | | State of Texas | | |
| Date | Full name of contributor out-of-state | PAC (ID#: | Amount of Contribut | ion (\$) |
| 10/15/2024 | Maggio, Marie | | | \$36.32 |
| | | | | |
| | | | | |
| | | | | |
| | Beaumont, TX 77706 | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruc | ions) | |
| Retired | | TFRW District Direc | | |
| Data | Full name of contributor out-of-state | | | |
| Date | | e PAC (ID#: | Amount of Contribut | |
| 10/20/2024 | Malin, Delores | | | \$46.61 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Orange, TX 77632 | i | | |
| | pation / Job title (See Instructions) | Employer (See Instruc | ions) | |
| Retired | | Retired | | |
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| | The Instru | ction Guide explains how to complete this | form. | | Total pages Schedule A1: Sch: 19/32 Rpt: 22/36 | |
|---|--------------|---|--|----|---|---------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | ngle Republican Women | | 1 | 00055125 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 10/22/2024 | Manuel, Michael | | | | \$36.32 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Beaumont, TX 77706 | i | | | |
| 8 | | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Retail Store | Owner | LATEEDA BOUTIQUE | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 10/16/2024 | Martin Jr, Richard D | | | | \$72.33 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Beaumont, TX 77706 | i | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Retired | | Retired | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 10/18/2024 | Mayes, Pat | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Beaumont, TX 77706 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Retired | | Entergy Texas | | | |
| | Date | |) | | Amount of Contribution (\$) | |
| | 10/15/2024 | Mazzola, Gigi | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Decument TV 77700 | | | | |
| ┝ | Driverinel | Beaumont, TX 77706 | Employer (Coolingtructions | | | |
| | Physician's | pation / Job title (See Instructions) | Employer (See Instructions SETX Cardiology Assoc | | | |
| | - | | | _ | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 09/30/2024 | Meshwert, Claudia | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Resument TV 77701 | | | | |
| ⊢ | Drincipal as | Beaumont, TX 77701 | Employer (See Instruction | | | |
| | Real Estate | pation / Job title (See Instructions) | Employer (See Instructions Reimage Properties and | | vestments LLC | |
| ⊢ | | FIOICSSIUTIAL | | | | |
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| The Instr | uction Guide explains how to complete this f | iorm. | 1 Total pages Schedule A1: Sch: 20/32 Rpt: 23/36 | |
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| 2 FILER NAM | F | | 3 Filer ID (Ethics Commission F | -ilers) |
| | angle Republican Women | | 00055125 | liore, |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) | |
| 10/11/2024 | Miles, Diana | | | \$72.33 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Beaumont, TX 77713 | | | |
| 8 Principal occ | cupation / Job title (See Instructions) | 9 Employer (See Instructions | ;) | |
| RN - Direct | tor of Quality | Baptist Hospitals of Sou | theast Texas | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 10/21/2024 | Morgan, Marsha | | | \$72.33 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Crystal Beach, TX 77650 | | | |
| Principal occ | cupation / Job title (See Instructions) | Employer (See Instructions | <u>ا</u> ٤) | |
| Retired CN | IA | Retired | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 10/12/2024 | | | | \$36.32 |
| | | | | |
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| | | | | |
| | Beaumont, TX 77707 | | | |
| Principal occ | L cupation / Job title (See Instructions) | Employer (See Instructions | <u>ا</u> ٤) | |
| retired | • | self | , | |
| Date | Full name of contributor Out-of-state PAC (ID#: | <u> </u> | Amount of Contribution (\$) | |
| 10/21/2024 | | / | Amount of Contribution (4) | \$35.00 |
| 10/21/202 | | | | Ψ00.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Vidor, TX 77662 | | | |
| Principal occ | cupation / Job title (See Instructions) | Employer (See Instructions | <u>ا</u> ۱) | |
| Retired | | Retired | 7 | |
| | Full name of contributor out-of-state PAC (ID#: | | Amount of Contribution (\$) | |
| Date 09/30/2024 | |) | Amount of Contribution (\$) | \$36.32 |
| 091301202- | | | | ⊅ 30.3∠ |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Port Neches, TX 77651 | | | |
| Drincinal occ | | Employer (See Instructions | | |
| retired | cupation / Job title (See Instructions) | Employer (See Instructions retired | <i>i</i>) | |
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| The Instru | ction Guide explains how to complete this f | form. | 1 Total pages Schedule A1: Sch: 21/32 Rpt: 24/36 | |
|-----------------------------------|---|---------------------------------------|---|------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |) |
| | ngle Republican Women | | 00055125 | , |
| 4 Date 10/15/2024 | 5 Full name of contributor out-of-state PAC (ID#: Nixon, Bettie 6 Contributor address; City; State; Zip Code | | 7 Amount of Contribution (\$) \$35 | 5.00 |
| | Beaumont, TX 77706 | | | |
| 8 Principal occu retired educa | upation / Job title (See Instructions) ator | 9 Employer (See Instructions BISD | ;) | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 09/30/2024 | | | \$72 | 2.33 |
| | Contributor address; City; State; Zip Code | | | |
| | Port Arthur, TX 77642 | | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | 3) | |
| Retired | | None | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 10/16/2024 | Otto, Barbara | | \$36 | 5.32 |
| | Contributor address; City; State; Zip Code Beaumont, TX 77708 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u></u> | |
| Retired | | City of Beaumont RETIR | | |
| Date | Full name of contributor Out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 10/14/2024 | Otto, Barbara | | \$35 | 5.00 |
| | Contributor address; City; State; Zip Code | | | |
| | Beaumont, TX 77708 | | | |
| Principal occu Retired | upation / Job title (See Instructions) | Employer (See Instructions Retired | ;;) | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 10/20/2024 | Owen, Denise | | \$36 | 6.32 |
| | Contributor address; City; State; Zip Code | | | |
| | Beaumont, TX 77706 | 1 | <u> </u> | |
| | upation / Job title (See Instructions) | Employer (See Instructions | ;) | |
| counselor | | Self | | |
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| | The Instru | ction Guide explains how to complete this f | 1 | Total pages Schedule A1: Sch: 22/32 Rpt: 25/36 | | |
| 2 | 2 FILER NAME | | | | Filer ID (Ethics Commission | Filers) |
| | | ngle Republican Women | | | 00055125 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| | 10/11/2024 | Parker, Mary Ann | | | | \$36.32 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Beaumont, TX 77706 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Retired | | Belk Co fine jewelry | | | |
| F | Date | Full name of contributor out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 09/28/2024 | Parker, Mary Ann | | | | \$36.32 |
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| | | | | | | |
| | | Beaumont, TX 77706 | | | | |
| ⊢ | Princinal occu | | Employer (See Instructions | <u>ا</u> | | |
| | Principal occupation / Job title (See Instructions) Employer (See Instruction Retired Belk & Co Fine Jewelry | | | | | |
| | | | | _ | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 10/22/2024 | Parmer, Sarah H | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | | | | | |
| | | Beaumont, TX 77706 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Home | | Myself | | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 10/21/2024 | Passmore, Sharon | | | | \$35.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | | | | | |
| | | Beaumont, TX 77706 | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Retired | | Retired | | | |
| ⊨ | Date | Full name of contributor out-of-state PAC (ID#:_ |) | Г | Amount of Contribution (\$) | |
| | 10/22/2024 | Peters, Sharon | | | / inician of Continuation (+) | \$35.00 |
| | 10/22/2024 | | | | | 400.00 |
| | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | |
| | | Lumberton, TX 77657 | | | | |
| ⊢ | Drinoinal accord | | Employor (See Instructions | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Retired Teac | | Retired | | | |
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| The Instru | ction Guide explains how to complete this f | 1 Total pages Schedule A1: Sch: 23/32 Rpt: 26/36 | |
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| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) | |
| | ngle Republican Women | | 00055125 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 09/29/2024 | Phelan Nepveux, Wanda | | \$72.3 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | Beaumont, TX 77707 | | |
| 8 Principal occu retired | upation / Job title (See Instructions) | 9 Employer (See Instructions retired | 3) |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 10/15/2024 | Phillips, Joy | | \$36.3 |
| - | Contributor address; City; State; Zip Code | | • |
| | Beaumont, TX 77707 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | Γ δ) |
| Retired | | Garth House | , |
| Date | Full name of contributor out-of-state PAC (ID#: | <u> </u> | Amount of Contribution (\$) |
| 10/14/2024 | Pierce, Sheree | / | \$35. |
| 10/14/2024 | Contributor address; City; State; Zip Code | | φου |
| | Beaumont, TX 77706 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> |
| | leighborhood Ministries | Wesley Methodist Churc | |
| Date | |) | Amount of Contribution (\$) |
| 10/15/2024 | Powell, Vicki | / | \$36. |
| | | | |
| | Contributor address; City; State; Zip Code | | |
| | Beaumont, TX 77707 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Retired educ | cator | NA | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 10/21/2024 | Ransonette, Charlotte | | \$35.0 |
| | Contributor address; City; State; Zip Code | | 1 |
| | Port Arthur, TX 77642 | | |
| Drippingl oppu | | | |
| | ipation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Retired | | Retired | |
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| | The Instru | ction Guide explains how to comp | plete this fo | orm. | 1 | Total pages Schedule A1: Sch: 24/32 Rpt: 27/36 | |
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| 2 | FILER NAME | | | | _ | Filer ID (Ethics Commission | Filers) |
| | | ngle Republican Women | | | 1 | 00055125 | - , |
| 4 | Date | 5 Full name of contributor out-of-sta | state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 10/20/2024 | Reese, Susan | | | | | \$35.00 |
| | | 6 Contributor address; City; State; Zip Coc | | | " | | |
| | | 1 | | | | | |
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| | Dringingloppy | Beaumont, TX 77706 | | C Employer (Coo Instructions | <u> </u> | | |
| 8 | Principal occu PreSchool 1 | ipation / Job title (See Instructions) | | 9 Employer (See Instructions St Andrews Presbyterial | | aurch Dav School | |
| | | | | | | | |
| | Date | | tate PAC (ID#: |) | | Amount of Contribution (\$) | ФОЕ 00 |
| | 10/15/2024 | | | | | | \$35.00 |
| | | Contributor address; City; State; Zip Coc | de | | | | |
| | | 1 | | | | | |
| | | Bridge City, TX 77611 | | | | | |
| | Principal occu | upation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> s) | | |
| | retired | , , , , , , , , , , , , , , , , , , , | | none | -, | | |
| ⊢ | Date | Full name of contributor Out-of-st. | state PAC (ID#: |) | Τ | Amount of Contribution (\$) | |
| | 09/27/2024 | Reid, Sherrie | | , | | | \$35.00 |
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| | | | uc | | | | |
| | | 1 | | | | | |
| | | Bridge City, TX 77611 | | | | | |
| | Principal occu | ipation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| | retired | | | NA | | | |
| | Date | Full name of contributor 🔲 out-of-sta | state PAC (ID#: |) | T | Amount of Contribution (\$) | |
| | 10/14/2024 | Ricks, DEBBIE | | | | | \$35.00 |
| | | Contributor address; City; State; Zip Coc | | | 1 | | |
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| | Driveinal age | BEAUMONT, TX 77706 | , | | Ĺ | | |
| | Principal occu admin asst | ipation / Job title (See Instructions) | | Employer (See Instructions | | ΤΝΛΛ | |
| | | | | Stewardship Healthcare | | | |
| | Date | | state PAC (ID#: |) | | Amount of Contribution (\$) | * 25 00 |
| | 10/14/2024 | | | | | | \$35.00 |
| | | Contributor address; City; State; Zip Coc | de | | | | |
| | | 1 | | | | | |
| | | Beaumont, TX 77726 | | | | | |
| ┝ | Principal occu | ipation / Job title (See Instructions) | I | Employer (See Instructions | <u> </u> | | |
| | Realtor | , , , , , , , , , , , , , , , , , , , | | Keller Williams, Memoria | | ouston | |
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| | The Instru | ction Guide explains how to complete this | s foi | rm. | 1 | Total pages Schedule A1: Sch: 25/32 Rpt: 28/36 | |
| 2 | 2 FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | ngle Republican Women | | | | 00055125 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID | #: |) | 7 | Amount of Contribution (\$) | |
| | 10/22/2024 | Rippeon, Jean | | | | | \$36.32 |
| | | 6 Contributor address; City; State; Zip Code | | | 1 | | |
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| | | Beaumont, TX 77706 | | | | | |
| 8 | | pation / Job title (See Instructions) | 9 | Employer (See Instructions | 5) | | |
| | Home | | | Home | | | |
| | Date | Full name of contributor 🔲 out-of-state PAC (ID | #: |) | | Amount of Contribution (\$) | |
| | 10/22/2024 | Smith, Saundra | | | | | \$70.00 |
| | | Contributor address; City; State; Zip Code | | | 1 | | |
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| | | | | | | | |
| | | Nederland, TX 77627 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Retired | | | Retired | | | |
| | Date | Full name of contributor 🔲 out-of-state PAC (ID | #: |) | | Amount of Contribution (\$) | |
| | 10/13/2024 | Smith, Saundra | | | | | \$70.00 |
| | | Contributor address; City; State; Zip Code | | | 1 | | |
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| | | | | | | | |
| | | Nederland, TX 77627 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Retired | | | Retired | | | |
| | Date | Full name of contributor 🛛 out-of-state PAC (ID | #: |) | | Amount of Contribution (\$) | |
| | 10/15/2024 | Sparkman, Linda | | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | | | | |
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| | | | | | | | |
| | | Beaumont, TX 77713 | | | Ĺ | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Retired | | | Retired | _ | | |
| | Date | Full name of contributor out-of-state PAC (ID | #: |) | | Amount of Contribution (\$) | |
| | 10/14/2024 | Sparkman, Linda | | | | | \$70.00 |
| | Contributor address; City; State; Zip Code | | | | | | |
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| | | Requirement TV 77710 | | | | | |
| ⊢ | Drineir - L | Beaumont, TX 77713 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions Retired | 5) | | |
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| | The Instruction Guide explains how to complete this form. | | | | | 1 Total pages Schedule A1: Sch: 26/32 Rpt: 29/36 | |
| 2 | 2 FILER NAME | | | | | Filer ID (Ethics Commission | Filers) |
| | | ngle Republican Women | | | | 00055125 | |
| 4 | Date | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 10/23/2024 | Suddath, Linda | | | | | \$36.32 |
| | | 6 Contributor address; City; State | | | 1 | | |
| | | | | | | | |
| | | Beaumont, TX 77706 | | | | | |
| 8 | | pation / Job title (See Instructions) | | 9 Employer (See Instructions | 5) | | |
| | Retired | | | Retired | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 10/22/2024 | Sutherland, Dorothy | | | | | \$35.00 |
| | | Contributor address; City; State | | | 1 | | |
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| | ļ | | | | | | |
| | | Groves, TX 77619 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Retired | | | Retired | | | |
| ╞ | Date | Full name of contributor | out-of-state PAC (ID#: |) | Ι | Amount of Contribution (\$) | |
| | 10/14/2024 | Sutherland, Dorothy | 」 · · · · · · · · · · · · · · · · · · · | | | • • | \$35.00 |
| | 1 | | e: Zip Code | | ł | | - |
| | ļ | | , Lip 0000 | | | | |
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| | ļ | Groves, TX 77619 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Retired | | | Retired | | | |
| ⊨ | Date | Full name of contributor | out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 10/21/2024 | Swearingen, Susan | | | | , | \$36.32 |
| | - ! | | e [.] Zin Code | | ł | | Ŧ |
| | ļ | Contributor address, Only, Cano | 5, Σιρ Ούας | | | | |
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| | 1 | Beaumont, TX 77707 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Retired Licer | nsed Professional Counselor | | Self | | | |
| ╞ | Date | Full name of contributor | out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 10/24/2024 | Templeton, Janelke |] •••• •• •••••• 、 | | | · · · · · · · · · · · · · · · · · · · | \$72.33 |
| | 1 | Contributor address; City; State | e [.] 7in Code | | ł | | |
| | ļ | | 2, Zip 0000 | | | | |
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| | | Beaumont, TX 77706 | | | | | |
| - | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> 5) | | |
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| The Instruc | ction Guide explains how | to complete this f | orm. | 1 Total pages Schedule A1: Sch: 27/32 Rpt: 30/36 | |
|------------------------------|---------------------------------------|----------------------------|---|---|---------|
| 2 FILER NAME | | | | 3 Filer ID (Ethics Commission | Filers) |
| | ngle Republican Women | | | 00055125 | |
| 4 Date | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) | |
| 10/15/2024 | Thomason, Pat | | | | \$36.32 |
| | 6 Contributor address; City; Sta | ate; Zip Code | | | |
| | Beaumont, TX 77706 | | | | |
| 8 Principal occup Retired | pation / Job title (See Instructions) | | 9 Employer (See Instructions Retired | ns) | |
| Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 10/15/2024 | Tibbetts, Marissa | | | | \$72.33 |
| | Contributor address; City; Sta | | | | |
| | Nederland, TX 77627 | | | | |
| | pation / Job title (See Instructions) | | Employer (See Instructions | | |
| Buisness ow | ner | | Marissa badon interior e | elegance and pristine living | |
| Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 09/29/2024 | Timaeus, Kay | | | | \$36.32 |
| | Contributor address; City; Sta | | | | |
| | Beaumont, TX 77706 | | | | |
| | pation / Job title (See Instructions) | | Employer (See Instructions | ns) | |
| registered ph | iarmacist | | retired | | |
| Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 10/21/2024 | Todd, Bobbie | | | | \$36.32 |
| | Contributor address; City; Sta | | | | |
| | Warren, TX 77664 | | | | |
| Principal occup retired | pation / Job title (See Instructions) | | Employer (See Instructions retired | - | |
| Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 10/23/2024 | Toler, Laura | | | | \$36.32 |
| | Contributor address; City; Sta | | | | |
| | Silsbee, TX 77656 | | | | |
| | pation / Job title (See Instructions) | | Employer (See Instructions | IS) | |
| Retired | | | Retired | | |
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| Th | e Instru | ction Guide explains how to complete this | 1 Total pages Schedule A1: Sch: 28/32 Rpt: 31/36 | |
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| 2 FILI | 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | | ngle Republican Women | | 00055125 |
| 4 Dat | te | 5 Full name of contributor Out-of-state PAC (ID# | £:) | 7 Amount of Contribution (\$) |
| 10/ | /22/2024 | Vance Vaccarello, Jo | | \$36.32 |
| | | 6 Contributor address; City; State; Zip Code | | |
| | | BEAUMONT, TX 77706 | | |
| 8 Prir | ncipal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) |
| | tired | | Retired | |
| Dat | to | Full name of contributor Out-of-state PAC (ID# |) | Amount of Contribution (\$) |
| | /15/2024 | Waddell, Linda | ·/ | \$36.32 |
| | 10/202 . | | | |
| | | Continuation address, Gity, State, Zip Code | | |
| | | | | |
| | | Orange, TX 77632 | | |
| Prir | ncipal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) |
| Ret | tired Adm | nin Assistant | Retired ExxonMobil | |
| Dat | te | Full name of contributor out-of-state PAC (ID# | t:) | Amount of Contribution (\$) |
| | /15/2024 | Walker, Deanna | · | \$36.32 |
| | | Contributor address; City; State; Zip Code | | • |
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| | | Beaumont, TX 77706 | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) |
| Ret | etired | | CSC Credit Services | |
| Dat | te | Full name of contributor out-of-state PAC (ID# | t:) | Amount of Contribution (\$) |
| 10/ | /14/2024 | Walker, Deanna | | \$35.00 |
| | | Contributor address; City; State; Zip Code | | 1 |
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| | | Beaumont, TX 77706 | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) |
| Rei | etired | | CSC Credit Services | |
| Dat | | Full name of contributor out-of-state PAC (ID# | <u>:</u>) | Amount of Contribution (\$) |
| 09/ | /29/2024 | Wallace, Michael | | \$36.32 |
| | Contributor address; City; State; Zip Code | | | |
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| | | DEALIMONE TY 77709 | | |
| Drin | | BEAUMONT, TX 77708 | Employer (Coo Instructions | |
| | ncipal occu ired | pation / Job title (See Instructions) | Employer (See Instructions retired chemical plant w | |
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| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A1: Sch: 29/32 Rpt: 32/36 | |
| 2 | 2 FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) | |
| | Golden Triar | ngle Republican Women | | | | 00055125 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC | C (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 09/30/2024 | Wallace, Pamela | | | | | \$36.32 |
| | | 6 Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
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| Ļ | | BEAUMONT, TX 77708 | | | | | |
| 8 | | pation / Job title (See Instructions) | 1 | 9 Employer (See Instructions | · | an Outoido Coloc | |
| | Retired | | | Banking USPS Bookkee | - | | |
| | Date | _ | C (ID#: |) | | Amount of Contribution (\$) | |
| | 10/22/2024 | | | | | | \$35.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | Beaumont, TX 77707 | | | | | |
| \vdash | Princinal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> ו) | | |
| | Retired | | | Retired | <i>''</i> | | |
| ╞ | Date | Full name of contributor Out-of-state PAC | - /ID#· | | | Amount of Contribution (\$) | |
| | 10/17/2024 | Welch, Liz | ⊂ (ID# |) | | | \$36.32 |
| | 10/11/202 . | | | | | | \$00.0L |
| | | Contributor autress, City, State, Zip Could | | | | | |
| | | | | | | | |
| | | Beaumont, TX 77707 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Retired | | | NA | | | |
| F | Date | Full name of contributor out-of-state PAC | C (ID#: |) | | Amount of Contribution (\$) | |
| | 09/29/2024 | Welch, Liz | | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | | | | |
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| | - · · · | Beaumont, TX 77707 | | | Ĺ | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Retired | | | Retired | | | |
| | Date | Full name of contributor out-of-state PAC | C (ID#: |) | | Amount of Contribution (\$) | + |
| | 10/20/2024 | Wickland, Mary | | | | | \$36.32 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | Beaumont, TX 77706 | | | | | |
| \vdash | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | :) | | |
| | CPA | | | Lamar State College | 9 | | |
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|------------------|--|---|---|-------|
| The Instru | ction Guide explains how to complete this | o form. | 1 Total pages Schedule A1: Sch: 30/32 Rpt: 33/36 | |
| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers | s) | |
| | ngle Republican Women | | 00055125 | -, |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID: | #:) | 7 Amount of Contribution (\$) | |
| 10/15/2024 | Williams, Kay | | \$3 | 36.32 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Beaumont, TX 77706 | | | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | |
| None | | Retired | | |
| Date | Full name of contributor out-of-state PAC (ID: | #:) | Amount of Contribution (\$) | |
| 10/06/2024 | Williams, Lajaunda | | \$3 | 36.32 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Nederland, TX 77627 | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 3) | |
| Retired | | Retired | | |
| Date | Full name of contributor out-of-state PAC (ID: | #:) | Amount of Contribution (\$) | |
| 10/14/2024 | Williams, Louise | | \$3 | 35.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Beaumont, TX 77706 | | | |
| Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | s) | |
| Retired | | Retired | | |
| Date | Full name of contributor out-of-state PAC (ID: | #:) | Amount of Contribution (\$) | |
| 09/30/2024 | Willis Campaign, Brandon | | \$3 | 36.32 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Beaumont, TX 77707 | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | |
| Candidate | | None | | |
| Date | Full name of contributor out-of-state PAC (ID: | #:) | Amount of Contribution (\$) | |
| 10/15/2024 | Wilson, Gail | | \$5 | 51.75 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Beaumont, TX 77706 | | | |
| Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | ;) | |
| Retired | | Educator | | |
| | | • | | |
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| The Instruction Guide explains h | ow to complete this f | orm. | 1 Total pages Schedule A1: Sch: 31/32 Rpt: 34/36 | |
|--|-------------------------|------------------------------|---|-----------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commissio | n Filers) |
| Golden Triangle Republican Women | | | 00055125 | |
| 4 Date 5 Full name of contributor | out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) | |
| 09/27/2024 Wilson, Gail | | | | \$51.75 |
| 6 Contributor address; City | y; State; Zip Code | | | |
| | | | | |
| | | | | |
| Beaumont, TX 77706 | | 1 | | |
| 8 Principal occupation / Job title (See Instruct | ions) | 9 Employer (See Instructions | 3) | |
| Retired educator | | Self | | |
| Date Full name of contributor | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 10/16/2024 Winfrey, Jeanette | | | | \$72.33 |
| Contributor address; City | | | | |
| | | | | |
| | | | | |
| Beaumont, TX 77713 | | • | | |
| Principal occupation / Job title (See Instruct | ions) | Employer (See Instructions | 3) | |
| REALTOR | | self | | |
| Date Full name of contributor | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 10/20/2024 Wright, Jay | | | | \$36.32 |
| Contributor address; City | | | | |
| | | | | |
| | | | | |
| Conroe, TX 77302 | | i | | |
| Principal occupation / Job title (See Instruct | ions) | Employer (See Instructions | 3) | |
| Justice | | Ninth Court of Appeals | | |
| Date Full name of contributor | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 10/23/2024 Zuzukin, Connie | | | | \$36.32 |
| Contributor address; City | y; State; Zip Code | | | |
| | | | | |
| | | | | |
| Beaumont, TX 77706 | | • | | |
| Principal occupation / Job title (See Instruct | ions) | Employer (See Instructions | 3) | |
| Retired | | Retired | | |
| Date Full name of contributor | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 10/21/2024 callais, donna | | | | \$36.32 |
| Contributor address; City | /; State; Zip Code | | | |
| | | | | |
| | | | | |
| Lumberton, TX 77657 | | | | |
| Principal occupation / Job title (See Instruct | ions) | Employer (See Instructions | 3) | |
| retired | | retired | | |
| | | · | | |

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 32/32 Rpt: 35/36 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Golden Triangle Republican Women 00055125 5 Full name of contributor 4 Amount of Contribution (\$) Date out-of-state PAC (ID#: 7 09/28/2024 \$36.32 callais, donna 6 Contributor address; City; State; Zip Code Lumberton, TX 77657 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) retired NA Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$)) 09/27/2024 \$36.32 vance, jo Contributor address; City; State; Zip Code BEAUMONT, TX 77706 Principal occupation / Job title (See Instructions) Employer (See Instructions) retired retired

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

| Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | elated Expense |
|---|---|------------------|
| 1 Total pages Schedule F1: | .: 2 FILER NAME 3 Filer ID (Ethics Col | mmission Filers) |
| Sch: 1/1 Rpt: 36/36 | Golden Triangle Republican Women 00055125 | |
| 4 Date | 5 Payee name | |
| 10/07/2024 | Elegante Hotel | |
| 6 Amount (\$) \$4,546.34 | 7 Payee address; City; State; Zip Code 2355 I-10 South Beaumont, TX 77705 | |
| corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense October Luncheon Meeting | ч т. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought Office held OH | |
| Date | Payee name | |
| 10/18/2024 | Texas Federation of Republican Women | I |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$225.00 | | |
| 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 Check if Austin, TX, officeholder living expense Membership Fees | т. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought Office held OH | |
| | | |