FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00083526 3 COMMITTEE NAME **OFFICE USE ONLY** Washington County Republican Women Date Received **ELECTRONICALLY FILED** 01/13/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P. O. Box 723 Date Hand-delivered or Date Postmarked Change of Address Brenham, TX 77834-0723 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Elisabeth NAME NICKNAME LAST **SUFFIX** Eickhoff STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 7424 Rolling Creek Rd. STREET **ADDRESS** (Residence or Business) Burton, TX 77835 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 7424 Rolling Creek Rd. MAILING **ADDRESS** Burton, TX 77835 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 855-8447 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 10/27/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

Washington County Republican Women 1. Candidates (Identify by name or, If applicable, classify by party.) [Attach lists on plain paper to complete this report if necessary.] 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders (Describe by date and location of election and nature of issue.) B. Opposed 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) [2] check here if this report qualifies for the higher itemization threshold 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) [3] TOTAL UNITEMIZED POLITICAL EXPENDITURES [4] TOTALS [5] TOTAL POLITICAL EXPENDITURES [6] TOTAL POLITICAL EXPENDITURES [7] TOTAL POLITICAL EXPENDITURES [8] 1,32 [8] CONTRIBUTION [8] 4,88 [8] CONTRIBUTION [9] CONTRIBUTION [9	2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
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LOAN TOTALS LAST DAY OF THE REPORTING PERIOD 6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me				INTAINED AS OF THE LAST	T DAY \$	4,889.78
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me					THE \$	0.00
true and correct and includes all information required to be reported by me	6 AFFIDAVIT	I			<u> </u>	
			true an	d correct and includes all info		
Elisabeth Eickhoff						
Signature of Campaign Treasurer				Signature of Ci	ampaign Treasu	irer
AFFIX NOTARY STAMP / SEAL ABOVE	AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed before me, by the said day	Sworn to and subscribed	before me, by the said		,	this the	day
of, 20, to certify which, witness my hand and seal of office.						
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath	Signature of officer ad	 ministering oath	Printed name of office	er administering oath	Title of offic	cer administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

					3 of 5
17 CO	MMITTE	E NAME	18 Filer ID	(Ethics Commissi	on Filers)
l		on County Republican Women	00083526	(Lunes Commission	0111 11010)
19 SC	- HEDULI	SUBTOTALS			
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE					AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,905.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	1,329.24
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	TARY POLITICAL CONTRIBUT	TIONS		SCHEDU	LE A1	
	The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/5		
2	FILER NAME Washington	: County Republican Women		3 Fi	ler ID (Ethics Commissi 0083526	ion Filers)	
4	Date 11/26/2024 5 Full name of contributor out-of-state PAC (ID#:) Washington County Republican Party 6 Contributor address; City; State; Zip Code		7 Ar	mount of Contribution (\$)	\$1,000.00		
		Brenham, TX 77834					
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instruction	ıs)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 5/5	Washington County Republican Women	00083526
4 Date	5 Payee name	
11/05/2024	Cannery Kitchen Brenham	
6 Amount (\$)	7 Payee address; City; State; Zip Code	9
\$300.12	314 E Alamo St	
Expenditure from corporate funds	Brenham, TX 77833	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Meals purchased at November 5th Meeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	nt Office held
oxportantare to perionic eye		
Date	Payee name	
11/25/2024	Texas Federation of Republican Women	
Amount (\$)	Payee address; City; State; Zip Code	9
\$556.60	13740 N. Highway 183	
,	Suite J	
Expenditure from		
corporate funds	Austin, TX 78750-1832	
PURPOSE OF	,	Description
EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		meals at November 4th meeting
		mode actional farmoung
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O		it Office field
·		