

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b> (Ethics Commission Filers) 00080974	<b>2 Total pages filed:</b> 20
<b>3 COMMITTEE NAME</b> Cherokee County Republican Women		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 01/10/2025	
<b>4 COMMITTEE ADDRESS</b>  <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 807  Jacksonville, TX 75766	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
<b>5 CAMPAIGN TREASURER NAME</b>		MS / MRS / MR FIRST MI Mrs. Karen  NICKNAME LAST SUFFIX Morris	
<b>6 CAMPAIGN TREASURER STREET ADDRESS</b> <small>(Residence or Business)</small>		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 955 CR 4120  Jacksonville, TX 75766	
<b>7 CAMPAIGN TREASURER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 955 CR 4120  Jacksonville, TX 75766	
<b>8 CAMPAIGN TREASURER PHONE</b>		AREA CODE PHONE NUMBER EXTENSION (903) 393-2951	
<b>9 REPORT TYPE</b>		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff	
<b>10 PERIOD COVERED</b>		Month Day Year      Month Day Year 07/01/2024      THROUGH      12/31/2024	
<b>11 ELECTION</b>		ELECTION DATE      ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other 11/04/2025 <input type="checkbox"/> General <input type="checkbox"/> Special      Constitutional Amendment	

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# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Cherokee County Republican Women	<b>13 Filer ID</b> (Ethics Commission Filers) 00080974
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,100.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 3,300.00
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 2,637.30
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**16 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mrs. Karen Morris  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - GPAC

<b>17 COMMITTEE NAME</b> Cherokee County Republican Women		<b>18 Filer ID</b> (Ethics Commission Filers) 00080974
<b>19 SCHEDULE SUBTOTALS</b>		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,100.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,300.00
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 1/13 Rpt: 4/20
2 FILER NAME Cherokee County Republican Women		3 Filer ID (Ethics Commission Filers) 00080974
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Batton, Judy	7 Amount of Contribution (\$)  \$35.00
	6 Contributor address; City; State; Zip Code  Jacksonville, TX 75766	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Christina	Amount of Contribution (\$)  \$40.00
	Contributor address; City; State; Zip Code  Rusk, TX 75785	
Principal occupation / Job title (See Instructions) Avon Seller		Employer (See Instructions) Self Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Christina	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code  Rusk, TX 75785	
Principal occupation / Job title (See Instructions) Avon Seller		Employer (See Instructions) Self Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Christina	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code  Rusk, TX 75785	
Principal occupation / Job title (See Instructions) Avon Seller		Employer (See Instructions) Self Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Christina	Amount of Contribution (\$)  \$35.00
	Contributor address; City; State; Zip Code  Rusk, TX 75785	
Principal occupation / Job title (See Instructions) Avon Seller		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/13 Rpt: 5/20
<b>2</b> FILER NAME Cherokee County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00080974
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burkett, Deborah <hr/> <b>6</b> Contributor address; City; State; Zip Code  Troup, TX 75789	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) teacher		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Butchko, Kay <hr/> Contributor address; City; State; Zip Code  Nacogdoches, TX 75961	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corley, Glynda <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) self
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corley, Glynda <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) self
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cox, Janie <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/13 Rpt: 6/20
<b>2</b> FILER NAME Cherokee County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00080974
<b>4</b> Date 09/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davis, Chris	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>6</b> Contributor address; City; State; Zip Code  Alto, TX 75925		
<b>8</b> Principal occupation / Job title (See Instructions) County Judge		<b>9</b> Employer (See Instructions) Cherokee County
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davis, Chris	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Alto, TX 75925		
Principal occupation / Job title (See Instructions) County Judge		Employer (See Instructions) Cherokee County
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davis, JayAnna	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Alto, TX 75925		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dotson, Allison	Amount of Contribution (\$)  \$40.00
Contributor address; City; State; Zip Code  Rusk, TX 75785		
Principal occupation / Job title (See Instructions) court coordinator		Employer (See Instructions) Cherokee County
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dotson, Allison	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Rusk, TX 75785		
Principal occupation / Job title (See Instructions) court coordinator		Employer (See Instructions) Cherokee County

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 4/13 Rpt: 7/20
2 FILER NAME Cherokee County Republican Women		3 Filer ID (Ethics Commission Filers) 00080974
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Durrett, Cynthia	7 Amount of Contribution (\$)  \$35.00
	6 Contributor address; City; State; Zip Code  Jacksonville, TX 75766	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellzey, Jake (Rep.)	Amount of Contribution (\$)  \$500.00
	Contributor address; City; State; Zip Code  Corsicana, TX 75110	
Principal occupation / Job title (See Instructions) US Congressman		Employer (See Instructions) Self
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Felt, Kim	Amount of Contribution (\$)  \$300.00
	Contributor address; City; State; Zip Code  Jacksonville, TX 75766	
Principal occupation / Job title (See Instructions) Director of Marketing & Admissions		Employer (See Instructions) Twin Oaks Rehabilitation and Nursing
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Felt, Kim	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  Jacksonville, TX 75766	
Principal occupation / Job title (See Instructions) Director of Marketing & Admissions		Employer (See Instructions) Twin Oaks Rehabilitation and Nursing
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Felt, Kim	Amount of Contribution (\$)  \$35.00
	Contributor address; City; State; Zip Code  Jacksonville, TX 75766	
Principal occupation / Job title (See Instructions) Director of Marketing & Admissions		Employer (See Instructions) Twin Oaks Rehabilitation and Nursing

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/13 Rpt: 8/20
<b>2</b> FILER NAME Cherokee County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00080974
<b>4</b> Date 09/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fuglestad, Linda	<b>7</b> Amount of Contribution (\$)  \$55.00
<b>6</b> Contributor address; City; State; Zip Code  Jacksonville, TX 75766		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fuglestad, Linda	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Jacksonville, TX 75766		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fuglestad, Linda	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Jacksonville, TX 75766		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fuglestad, Linda	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Jacksonville, TX 75766		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris, Cody (Rep.)	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code  Palestine, TX 75801		
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) Self



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/13 Rpt: 9/20
<b>2</b> FILER NAME Cherokee County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00080974
<b>4</b> Date 09/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Higginbotham, Mitzi <hr/> <b>6</b> Contributor address; City; State; Zip Code  Recklaw, TX 75784	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Higginbotham, Mitzi <hr/> Contributor address; City; State; Zip Code  Recklaw, TX 75784	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hood, Amber <hr/> Contributor address; City; State; Zip Code  Rusk, TX 75785	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Court Clerk		Employer (See Instructions) Cherokee
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jackson, Susan <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lassiter, Patsy <hr/> Contributor address; City; State; Zip Code  Rusk, TX 75785	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/13 Rpt: 10/20
<b>2</b> FILER NAME Cherokee County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00080974
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lassiter, Patsy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Rusk, TX 75785	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lusk, Laverne <hr/> Contributor address; City; State; Zip Code  Rusk, TX 75785	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) County clerk		Employer (See Instructions) Cherokee County
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lusk, Laverne <hr/> Contributor address; City; State; Zip Code  Rusk, TX 75785	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) County clerk		Employer (See Instructions) Cherokee County
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Tiffany <hr/> Contributor address; City; State; Zip Code  Rockwall, TX 75087	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) David E. Rohlf
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morris, Karen <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) shop owner		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/13 Rpt: 11/20
<b>2</b> FILER NAME Cherokee County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00080974
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morris, Karen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) shop owner		<b>9</b> Employer (See Instructions) Self Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morrison, Betty <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morrison, Betty <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nichols, Robert (Mr.) <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Texas Senate		Employer (See Instructions) self
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pearson, Carol <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/13 Rpt: 12/20
<b>2</b> FILER NAME Cherokee County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00080974
<b>4</b> Date 09/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pearson, Carol <hr/> <b>6</b> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pearson, Carol <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pearson, Carol <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Potter, Shonda <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Clerk Tax Office		Employer (See Instructions) Cherokee County
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Potter, Shonda <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Clerk Tax Office		Employer (See Instructions) Cherokee County

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/13 Rpt: 13/20
<b>2</b> FILER NAME Cherokee County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00080974
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Potter, Shonda <hr/> <b>6</b> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Clerk Tax Office		<b>9</b> Employer (See Instructions) Cherokee County
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Slaton, Michele <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) District Coordinator		Employer (See Instructions) Senator Robert Nichols
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Slaton, Michele <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) District Coordinator		Employer (See Instructions) Senator Robert Nichols
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stanovich, Janet <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Emergency Manager		Employer (See Instructions) Self Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stanovich, Janet <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Emergency Manager		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/13 Rpt: 14/20
<b>2</b> FILER NAME Cherokee County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00080974
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stone, Dick <hr/> <b>6</b> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Mayor		<b>9</b> Employer (See Instructions) City of Jacksonville
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stone, Janice <hr/> Contributor address; City; State; Zip Code  Rusk, TX 75785	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) County Court at Law Judge		Employer (See Instructions) Cherokee County
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stone, Janice <hr/> Contributor address; City; State; Zip Code  Rusk, TX 75785	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) County Court at Law Judge		Employer (See Instructions) Cherokee County
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tarrant, Meredith <hr/> Contributor address; City; State; Zip Code  Bullard, TX 75757	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tarrant, Meredith <hr/> Contributor address; City; State; Zip Code  Bullard, TX 75757	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/13 Rpt: 15/20
<b>2</b> FILER NAME Cherokee County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00080974
<b>4</b> Date 09/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Rhonda	<b>7</b> Amount of Contribution (\$) \$300.00
<b>6</b> Contributor address; City; State; Zip Code  Nacogdoches, TX 75961		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Rhonda	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code  Nacogdoches, TX 75961		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Rhonda	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Nacogdoches, TX 75961		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Rhonda	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Nacogdoches, TX 75961		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wegmet, Lu	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  Jacksonville, TX 75766		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/13 Rpt: 16/20
<b>2</b> FILER NAME Cherokee County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00080974
<b>4</b> Date 09/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Womack, Beverly <b>6</b> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Womack, Beverly Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)



# 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  
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/4 Rpt: 17/20	<b>2</b> FILER NAME Cherokee County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00080974
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<b>4</b> Date 09/16/2024	<b>5</b> Payee name Brookshires
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<b>6</b> Amount (\$) \$40.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 213 U.S. Hwy 69  Bullard, TX 75757
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wine for fundraiser
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/28/2024	Payee name Texas Federation of Republican Women
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Amount (\$) \$250.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13740 Hwy 183, Suite J4  Austin, TX 78750
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Patron dues for Karen Morris
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/27/2024	Payee name Texas Federation of Republican Women
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Amount (\$) \$240.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13740 Hwy 183, Suite J4  Austin, TX 78750
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 3 tickets to Tribute to Women luncheon
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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  
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/4 Rpt: 18/20	<b>2</b> FILER NAME Cherokee County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00080974
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<b>4</b> Date 08/13/2024	<b>5</b> Payee name The Bradford Exchange Checks
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<b>6</b> Amount (\$) \$58.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 9305  Milwaukee, IL 60714
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ordered Checks
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/16/2024	Payee name The Legacy
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Amount (\$) \$1,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 782 CR 1511  Jacksonville, TX 75766
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense September Dinner Fundraiser
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/09/2024	Payee name The Legacy
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Amount (\$) \$875.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 782 CR 1511  Jacksonville, TX 75766
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Christmas dinner
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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  
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/4 Rpt: 19/20	<b>2</b> FILER NAME Cherokee County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00080974
<b>4</b> Date 08/27/2024	<b>5</b> Payee name United States Post Office	
<b>6</b> Amount (\$) \$50.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 400 W. Rusk St.  Jacksonville, TX 75766	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PO Box renewal
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2024	Payee name Walmart	
Amount (\$) \$55.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1311 S. Jackson St.  Jacksonville, TX 75766	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gift Cards for our outgoing club officers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/16/2024	Payee name Withrow, Mike	
Amount (\$) \$200.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 702 San Antonio  Jacksonville, TX 75766	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DJ for our dinner
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# 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  
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/4 Rpt: 20/20	<b>2</b> FILER NAME Cherokee County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00080974
<b>4</b> Date 12/09/2024	<b>5</b> Payee name i Sign Shop	
<b>6</b> Amount (\$) \$32.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2034 N. Jackson St.  Jacksonville, TX 75766	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Plaque for outgoing president
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held