

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers) 00084922	2 Total pages filed: 33	OFFICE USE ONLY	
3 COMMITTEE NAME Great State Republicans			Date Received ELECTRONICALLY FILED 01/10/2025
4 TREASURER NAME Davenport, Mona			Date Hand-delivered or Date Postmarked
5 ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> Runoff	Receipt # Amount
	<input type="checkbox"/> July 15	<input type="checkbox"/> 10th day after campaign treasurer resignation	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution report	Date Processed
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Other (specify) _____	Date Imaged
6 ORIGINAL PERIOD COVERED	Month Day Year 10/27/2024	THROUGH	Month Day Year 12/31/2024

7 EXPLANATION OF CORRECTION
Our Contribution Balance was incorrect. It has been corrected to reflect the balance as of the last day of the reporting period

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mona Davenport

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

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

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM **GPAC**
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00084922	2 Total pages filed: 33
3 COMMITTEE NAME Great State Republicans		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 01/10/2025	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 764 Hallettsville, TX 77964	Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Mona	MI	
	NICKNAME LAST SUFFIX Davenport		
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 106 Hillside Terrace Hallettsville, TX 77964		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 106 Hillside Terrace Hallettsville, TX 77964		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (361) 798-0731		
9 REPORT TYPE	<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
10 PERIOD COVERED	Month Day Year 10/27/2024	THROUGH	Month Day Year 12/31/2024
11 ELECTION	ELECTION DATE Month Day Year 01/07/2025	ELECTION TYPE	
		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Great State Republicans	13 Filer ID (Ethics Commission Filers) 00084922
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9,650.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,103.90
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 12,828.65
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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

Mona Davenport

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC

17 COMMITTEE NAME Great State Republicans		18 Filer ID (Ethics Commission Filers) 00084922
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,695.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,955.00
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	\$ 3,103.90
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/16 Rpt: 5/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berger, Becky (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Schulenburg, TX 78956	7 Amount of Contribution (\$) \$65.00
8 Principal occupation / Job title (See Instructions) Geologist		9 Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blahuta, Beverly (Mrs.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blahuta, Beverly (Mrs.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bohuslav, Nola (Mrs.) <hr/> Contributor address; City; State; Zip Code Moulton, TX 77975	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandenberger, Susan (Mrs.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/16 Rpt: 6/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandenberger, Susan (Mrs.)	7 Amount of Contribution (\$) \$70.00
	6 Contributor address; City; State; Zip Code Hallettsville, TX 77964	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briscoe, Reggie (Mr.)	Amount of Contribution (\$) \$340.00
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bujnoch, Ruby (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Houston, TX 77063	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavarretta, Blanche (Mrs.)	Amount of Contribution (\$) \$105.00
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chovanetz, Melissa (Mrs.)	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	
Principal occupation / Job title (See Instructions) Secretary		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/16 Rpt: 7/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chovanetz, Rida (Mrs.)	7 Amount of Contribution (\$) \$70.00
6 Contributor address; City; State; Zip Code Hallettsville, TX 77964		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chovanetz, Rida (Mrs.)	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Hallettsville, TX 77964		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cromey, Nicole (Ms.)	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Moulton, TX 77975		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davenport, Mona (Ms.)	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Hallettsville, TX 77964		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davenport, Mona (Ms.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Hallettsville, TX 77964		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/16 Rpt: 8/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davenport, Mona (Ms.)	7 Amount of Contribution (\$) \$35.00
6 Contributor address; City; State; Zip Code Hallettsville, TX 77964		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davenport, Mona (Ms.)	Amount of Contribution (\$) \$80.00
Contributor address; City; State; Zip Code Hallettsville, TX 77964		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobbs, Dee (Mrs.)	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code Hallettsville, TX 77964		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehler, Paula (Mrs.)	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code Hallettsville, TX 77964		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehler, Paula (Mrs.)	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Hallettsville, TX 77964		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/16 Rpt: 9/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellefson, Jennifer (Ms.)	7 Amount of Contribution (\$) \$70.00
	6 Contributor address; City; State; Zip Code Flatonia, TX 78941	
8 Principal occupation / Job title (See Instructions) Banker		9 Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faircloth, Cheryl (Mrs.)	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Schulenburg, TX 78956	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faircloth, Cheryl (Mrs.)	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code Schulenburg, TX 78956	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, James (Mr.)	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	
Principal occupation / Job title (See Instructions) JP		Employer (See Instructions)
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grahmann, Paula (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/16 Rpt: 10/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenwell, Kim (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Hallettsville, TX 77964	7 Amount of Contribution (\$) \$70.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grindeland, Barbara (Mrs.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grindeland, Barbara (Mrs.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henke, Jeanette (Ms.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Georgia (Mrs.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/16 Rpt: 11/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hynes, Melba (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Hallettsville, TX 77964	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Dolly (Mrs.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Shirley (Mrs.) <hr/> Contributor address; City; State; Zip Code Victoria, TX 77904	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Shirley (Mrs.) <hr/> Contributor address; City; State; Zip Code Victoria, TX 77904	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanak, Lorena (Mrs.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) County Representative		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/16 Rpt: 12/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kocian, Joy (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koehn, Barbara (Ms.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koehn, Barbara (Ms.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$345.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moellenberndt, Barbara (Mrs.) <hr/> Contributor address; City; State; Zip Code Schulenburg, TX 78956	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mudd, Joan (Mrs.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$245.00
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/16 Rpt: 13/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mudd, Joan (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Hallettsville, TX 77964	
8 Principal occupation / Job title (See Instructions) Rancher		9 Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muehr, Janis (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muehr, Janis (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Day, Geraldine (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Schulenburg, TX 78956	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Partida, Virginia (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Hallettsville, TX 77974	
Principal occupation / Job title (See Instructions) County Administrator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/16 Rpt: 14/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Partida, Virginia (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Hallettsville, TX 77964	7 Amount of Contribution (\$) \$70.00
8 Principal occupation / Job title (See Instructions) County Administrator		9 Employer (See Instructions)
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Partida, Virginia (Ms.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$643.00
Principal occupation / Job title (See Instructions) County Administrator		Employer (See Instructions)
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Partida, Virginia (Ms.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$642.00
Principal occupation / Job title (See Instructions) County Administrator		Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Partida, Virginia (Ms.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) County Administrator		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peck, Aileen (Mrs.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/16 Rpt: 15/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peck, Aileen (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Hallettsville, TX 77964	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pustka, Sandra (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pustka, Sandra (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rains, Cathy (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, JoAnn (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	
Principal occupation / Job title (See Instructions) County Representative		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/16 Rpt: 16/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renger, Karen (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Hallettsville, TX 77964	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renger, Karen (Mrs.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renger, Karen (Mrs.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Judy (Mrs.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, Christine (Mrs.) <hr/> Contributor address; City; State; Zip Code Shiner, TX 77984	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/16 Rpt: 17/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, Christine (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Shiner, TX 77984	7 Amount of Contribution (\$) \$140.00
8 Principal occupation / Job title (See Instructions) Banker		9 Employer (See Instructions)
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, Christine (Mrs.) <hr/> Contributor address; City; State; Zip Code Shiner, TX 77984	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Linda (Ms.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Linda (Ms.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Linda (Ms.) <hr/> Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/16 Rpt: 18/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Linda (Ms.)	7 Amount of Contribution (\$) \$80.00
6 Contributor address; City; State; Zip Code Hallettsville, TX 77964		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spies, Janis (Mrs.)	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code Hallettsville, TX 77964		
Principal occupation / Job title (See Instructions) Secretary		Employer (See Instructions)
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steffek, Barbara (Mrs.)	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Hallettsville, TX 77964		
Principal occupation / Job title (See Instructions) District Clerk		Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steffek, Barbara (Mrs.)	Amount of Contribution (\$) \$65.00
Contributor address; City; State; Zip Code Hallettsville, TX 77964		
Principal occupation / Job title (See Instructions) District Clerk		Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steffek, Marsha (Mrs.)	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code Hallettsville, TX 77964		
Principal occupation / Job title (See Instructions) Secretary		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/16 Rpt: 19/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steffek, Marsha (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Hallettsville, TX 77964	
8 Principal occupation / Job title (See Instructions) Secretary		9 Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Svetlik, Carolyn (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Svetlik, Carolyn (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Svetlik, Carolyn (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Svetlik, Carolyn (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/16 Rpt: 20/33
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanner, Julie (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Sublime, TX 77986	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanner, Julie (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Sublime, TX 77986	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wenske, Lori (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Shiner, TX 77984	
Principal occupation / Job title (See Instructions) County Clerk		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/9 Rpt: 21/33	
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/06/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berger, Becky (Mrs.)	8 Amount of contribution (\$) \$25.00	9 In-kind contribution description Event
	7 Contributor address; City; State; Zip Code Schulenburg, TX 78956	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Geologist		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blahuta, Beverly (Mrs.)	Amount of contribution (\$) \$65.00	In-kind contribution description Event
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bohuslav, Nola (Mrs.)	Amount of contribution (\$) \$50.00	In-kind contribution description Event
	Contributor address; City; State; Zip Code Moulton, TX 77975	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/9 Rpt: 22/33	
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/06/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briscoe, Barbara (Mrs.)	8 Amount of contribution (\$) \$30.00	9 In-kind contribution description Event
	7 Contributor address; City; State; Zip Code Sheridan, TX 77475		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavarretta, Blanche (Mrs.)	Amount of contribution (\$) \$22.00	In-kind contribution description Event
	Contributor address; City; State; Zip Code Hallettsville, TX 77964		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chovanetz, Rida (Mrs.)	Amount of contribution (\$) \$48.00	In-kind contribution description Event
	Contributor address; City; State; Zip Code Hallettsville, TX 77964		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 3/9 Rpt: 23/33	
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/06/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davenport, Mona (Ms.)	8 Amount of contribution (\$) \$175.00	9 In-kind contribution description Event
	7 Contributor address; City; State; Zip Code Hallettsville, TX 77964		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennia, Lisa (Mrs.)	Amount of contribution (\$) \$75.00	In-kind contribution description Event
	Contributor address; City; State; Zip Code Schulenburg, TX 78956		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faircloth, Cheryl (Mrs.)	Amount of contribution (\$) \$250.00	In-kind contribution description Event
	Contributor address; City; State; Zip Code Schulenburg, TX 78956		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 4/9 Rpt: 24/33	
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/06/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foyt, Pam (Mrs.) 7 Contributor address; City; State; Zip Code Hallettsville, TX 77964	8 Amount of contribution (\$) \$200.00	9 In-kind contribution description Event <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Secretary		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenwell, Steven (Mr.) Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of contribution (\$) \$300.00	In-kind contribution description Event <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Sheriff		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Georgia (Mrs.) Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of contribution (\$) \$40.00	In-kind contribution description Event <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 5/9 Rpt: 25/33	
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/06/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanak, Lorena (Mrs.)	8 Amount of contribution (\$) \$75.00	9 In-kind contribution description Event
	7 Contributor address; City; State; Zip Code Hallettsville, TX 77964		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) County Representative		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanak, Lorena (Mrs.)	Amount of contribution (\$) \$60.00	In-kind contribution description Event
	Contributor address; City; State; Zip Code Hallettsville, TX 77964		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) County Representative		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kouba, Elizabeth (Mrs.)	Amount of contribution (\$) \$30.00	In-kind contribution description Event
	Contributor address; City; State; Zip Code Hallettsville, TX 77964		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 6/9 Rpt: 26/33	
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/06/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lannen, Bethany (Ms.)	8 Amount of contribution (\$) \$50.00	9 In-kind contribution description Event
	7 Contributor address; City; State; Zip Code Moulton, TX 77975		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Self Employed		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moellenberndt, Barbara (Mrs.)	Amount of contribution (\$) \$50.00	In-kind contribution description Event
	Contributor address; City; State; Zip Code Schulenburg, TX 78956		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Self Employed		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moellenberndt, Barbara (Mrs.)	Amount of contribution (\$) \$50.00	In-kind contribution description Event
	Contributor address; City; State; Zip Code Schulenburg, TX 78956		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Self Employed		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 7/9 Rpt: 27/33	
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/06/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muehr, Janis (Mrs.)	8 Amount of contribution (\$) \$50.00	9 In-kind contribution description Event
	7 Contributor address; City; State; Zip Code Hallettsville, TX 77964	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Partida, Virginia (Ms.)	Amount of contribution (\$) \$40.00	In-kind contribution description Event
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) County Administrator		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peck, Aileen (Mrs.)	Amount of contribution (\$) \$40.00	In-kind contribution description Event
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 8/9 Rpt: 28/33	
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/06/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pustka, Sandra (Mrs.)	8 Amount of contribution (\$) \$40.00	9 In-kind contribution description Event
	7 Contributor address; City; State; Zip Code Hallettsville, TX 77964	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renger, Karen (Mrs.)	Amount of contribution (\$) \$40.00	In-kind contribution description Event
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Linda (Ms.)	Amount of contribution (\$) \$50.00	In-kind contribution description Event
	Contributor address; City; State; Zip Code Hallettsville, TX 77964	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 9/9 Rpt: 29/33	
2 FILER NAME Great State Republicans		3 Filer ID (Ethics Commission Filers) 00084922	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/06/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ed (Mr.)	8 Amount of contribution (\$) \$100.00	9 In-kind contribution description Event
	7 Contributor address; City; State; Zip Code Hallettsville, TX 77964	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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.

1 Total pages Schedule F1: Sch: 1/4 Rpt: 30/33	2 FILER NAME Great State Republicans	3 Filer ID (Ethics Commission Filers) 00084922
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4 Date 12/05/2024	5 Payee name Albert Pozzi Caterings
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6 Amount (\$) \$1,350.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 119 Hessler Hallettsville, TX 77964
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Catering
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/09/2024	Payee name Amazon
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Amount (\$) \$108.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 410 Terry Ave. N Seattle, WA 98109
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies
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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 11/03/2024	Payee name Brookshire Brothers
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Amount (\$) \$25.47 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1514A N. Texana Hallettsville, TX 77964
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refreshments
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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.

1 Total pages Schedule F1: Sch: 2/4 Rpt: 31/33	2 FILER NAME Great State Republicans	3 Filer ID (Ethics Commission Filers) 00084922
4 Date 11/23/2024	5 Payee name Brookshire Brothers	
6 Amount (\$) \$26.98 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1514A N. Texana Hallettsville, TX 77964	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refreshments
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/26/2024	Payee name Cabos San Lucas	
Amount (\$) \$42.51 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1636 N. Texana Hallettsville, TX 77964	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2024	Payee name Hobby Lobby	
Amount (\$) \$110.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8404 N. Navarro Victoria, TX 77904	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Decoratios
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.

1 Total pages Schedule F1: Sch: 3/4 Rpt: 32/33	2 FILER NAME Great State Republicans	3 Filer ID (Ethics Commission Filers) 00084922
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4 Date 11/30/2024	5 Payee name Hobby Lobby
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6 Amount (\$) \$52.67 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8404 N. Navarro Victoria, TX 77904
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Decoratios
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/25/2024	Payee name Jeffrey Addicott Texas Now
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Amount (\$) \$350.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 7727 San Antonio, TX 77437
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
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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 11/08/2024	Payee name Lavaca County Office Supply
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Amount (\$) \$160.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 107 N. Main Hallettsville, TX 77964
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Invitations
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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.

1 Total pages Schedule F1: Sch: 4/4 Rpt: 33/33	2 FILER NAME Great State Republicans	3 Filer ID (Ethics Commission Filers) 00084922
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4 Date 12/05/2024	5 Payee name Mudpies Entertainment
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6 Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 101 Yoakum, TX 77995
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Entertainment
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/08/2024	Payee name TFRW
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Amount (\$) \$620.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 171146 Austin, TX 78717
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dues
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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 11/25/2024	Payee name WalMart
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Amount (\$) \$7.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1506 N. Texana Hallettsville, TX 77964
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refreshments
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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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