FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00055452 3 COMMITTEE NAME **OFFICE USE ONLY** Wilson County Republican Women Date Received **ELECTRONICALLY FILED** 01/14/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 743 County Road 141 Date Hand-delivered or Date Postmarked Change of Address Floresville, TX 78114 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Dawn NAME NICKNAME LAST **SUFFIX** Barnett STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 743 County Road 141 STREET **ADDRESS** (Residence or Business) Floresville, TX 78114 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 743 CR 141 MAILING **ADDRESS** Floresville, TX 78114 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 744-5868 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Wilson County Repul	olican Women		00055452	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	30.00
	2. TOTAL POLITICA (OTHER THAN PLE	IL CONTRIBUTIONS DOGES, LOANS, OR GUARANTEES OF LOANS)	\$	10,325.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	8,930.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	0.00
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT			·	
		I swear, or affirm, under penalty of per true and correct and includes all inform under Title 15, Election Code.		
		Ms. Daw	n Barnett	
		Signature of Car		r
AFFIX NOTAI	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ed before me, by the said	, th	nis the	day
of	, 20, to certify v	which, witness my hand and seal of office.		-
Signature of officer	administering oath	Printed name of officer administering oath	Title of office	r administering oath

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			3 of 23			
17 COMMITTEE Wilson Cou	NAME nty Republican Women	18 Filer ID 00055452	(Ethics Commission Filers)			
	19 SCHEDULE SUBTOTALS NAME OF SCHEDULE					
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 10,325.00			
2. 🔲 🥸	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3. 📗 🤄	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$			
	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$			
	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$			
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$			
	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$			
8. 🗌 🤄	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$			
9 \$	SCHEDULE E: LOANS		\$			
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 8,930.00			
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$			
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$			

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/8 Rpt: 4/23	
2	FILER NAME Wilson Coun	ty Republican Women		3	Filer ID (Ethics Commission 00055452	Filers)
4	Date 08/18/2024	5 Full name of contributor out-of-state PAC (ID#:) 7		7	Amount of Contribution (\$)	\$10.00
_		Floresville, TX 78114				
8	Principal occu retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/13/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$30.00
	Floresville, TX 78114 Principal occupation / Job title (See Instructions) Employer (See Instruction			;)		
	Self-Employe	ed				
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#: Barnett, Dawn Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$40.00
		Floresville, TX 78114				
	Principal occu Tax Assesso	pation / Job title (See Instructions) r Collector	Employer (See Instructions	()		
	Date 11/13/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$30.00
	Principal occu Retired Educ	Adkins, TX 78101 pation / Job title (See Instructions) cator	Employer (See Instructions	5)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_Chitty, Carol (Lady) Contributor address; City; State; Zip Code Floresville, TX 78114)		Amount of Contribution (\$)	\$30.00
	Principal occu Retired Teac	pation / Job title (See Instructions) her	Employer (See Instructions	<u> </u>		
		I				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/8 Rpt: 5/23	
2	FILER NAME Wilson Cour	nty Republican Women		3	Filer ID (Ethics Commission 00055452	n Filers)
4	Date 08/29/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$10.00
_		LA VERNIA, TX 78121				
8	Principal occu retired	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_Foster, Pamela Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00
		LA VERNIA, TX 78121				
	Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Frank, Evelyn Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$30.00
		Floresville, TX 78114				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Gay, Michelle Contributor address; City; State; Zip Code Floresville, TX 78114			Amount of Contribution (\$)	\$30.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_Ghella, Sarah Contributor address; City; State; Zip Code Floresville, TX 78114)		Amount of Contribution (\$)	\$30.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1				
	The Instru	ction Guide explains how to compl	ete this fo	m.	1	Total pages Schedule A1: Sch: 3/8 Rpt: 6/23	
2	FILER NAME Wilson Coun	ty Republican Women			3	Filer ID (Ethics Commission 00055452	ı Filers)
4	Date 11/13/2024	 Full name of contributor out-of-state Out-of-st)	7	Amount of Contribution (\$)	\$30.00
_		Stockdale, TX 78160	1-		_		
8		pation / Job title (See Instructions) fessional Counselor	9	Employer (See Instructions	5)		
	Date 11/13/2024	Glowka, Virginia				Amount of Contribution (\$)	\$40.00
		Adkins, TX 78101			<u></u>		
	Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/13/2024	Full name of contributor out-of-state Gray, Lynette Contributor address; City; State; Zip Code	te PAC (ID#:)		Amount of Contribution (\$)	\$30.00
		LA VERNIA, TX 78121					
	Principal occu Sales	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/13/2024	Griffin, Marguerite)		Amount of Contribution (\$)	\$40.00
	Principal occu Housewife	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 11/13/2024	Gutierrez, Monica)		Amount of Contribution (\$)	\$40.00
	Principal occu Judge	oation / Job title (See Instructions)		Employer (See Instructions	5)		
			•				

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruc	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 4/8 Rpt: 7/23	
2	FILER NAME Wilson Coun	ty Republican Women		3	Filer ID (Ethics Commission 00055452	n Filers)
4	Date 08/18/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_		Floresville, TX 78114	1	Ĺ		
8	Principal occu Judge	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 11/13/2024	Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$30.00
	Tyler, TX 75701 Principal occupation / Job title (See Instructions) Retired Employer (See Instruction			s)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID MANEN, Ruby Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$40.00
	Principal occu	Floresville, TX 78114 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/13/2024	Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$40.00
	Principal occu	Floresville, TX 78114 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 08/18/2024	Full name of contributor	D#:)		Amount of Contribution (\$)	\$10.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this 1	orm.	1	Total pages Schedule A1: Sch: 5/8 Rpt: 8/23	
2	FILER NAME Wilson Coun	ty Republican Women		3	Filer ID (Ethics Commission 00055452	ı Filers)
4	Date 11/13/2024			7	Amount of Contribution (\$)	\$30.00
_	Deinsinal assu	LA VERNIA, TX 78121	Con Instructions	<u></u>		
8	Self-Employe	pation / Job title (See Instructions) ed	9 Employer (See Instructions	5)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_Meyer, Sharon Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00
		Stockdale, TX 78160	1	<u> </u>		
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_Miller, Joyce Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00
		Adkins, TX 78101				
	Principal occu CPS Energy	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/29/2024	Full name of contributor out-of-state PAC (ID#:_Minor, Sheri Contributor address; City; State; Zip Code LA VERNIA, TX 78121			Amount of Contribution (\$)	\$20.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_Moczygemba, Mellissa Contributor address; City; State; Zip Code Falls City, TX 78113			Amount of Contribution (\$)	\$30.00
	Principal occu J & J Farms	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	J & J Faiiis		<u> </u>			

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/8 Rpt: 9/23	
2	FILER NAME Wilson Coun	ty Republican Women		3	Filer ID (Ethics Commission 00055452	Filers)
4	Date 11/13/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$30.00
_	District	Floresville, TX 78114				
8	Wilson Coun		9 Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Phillips, Kitty Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00
	Dringinal occu	Floreville, TX 78114 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	Jation / Job title (See matractions)	Employer (See instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_Reed, Wanda Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00
		Floresville, TX 78114				
	Principal occu JP 1 Chief C	pation / Job title (See Instructions) lerk	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_Sells, Lois Contributor address; City; State; Zip Code Adkins, TX 78101			Amount of Contribution (\$)	\$30.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_Silman, Josephine C Contributor address; City; State; Zip Code Floresville, TX 78114)		Amount of Contribution (\$)	\$30.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDU	LE A1	
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/8 Rpt: 10/23	
2	FILER NAME Wilson Cour	ıty Republican Women		3	Filer ID (Ethics Commission 00055452	on Filers)
4	Date 07/16/2024	5 Full name of contributor out-of-state PAC (ID#:) 7		7	Amount of Contribution (\$)	\$30.00
_	Dringing! goog	Floresville, TX 78114	Employer (Coe Instructions			
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Sobersoki, Theresa Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$30.00
	Principal occu	Floresville, TX 78114 pation / Job title (See Instructions)	Employer (See Instructions)		
	Retired	, , , , , , , , , , , , , , , , , , , ,		,		
	Date 08/18/2024	Full name of contributor out-of-state PAC (ID#: TFRW Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$600.00
		AUSTIN, TX 78750				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/18/2024	Full name of contributor out-of-state PAC (ID#:_ Trevino, Toni Contributor address; City; State; Zip Code Rio Grande City, TX 78582)		Amount of Contribution (\$)	\$10.00
	Principal occu Self	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/02/2024	Full name of contributor out-of-state PAC (ID#:_WCRW Contributor address; City; State; Zip Code Adkins, TX 78101			Amount of Contribution (\$)	\$8,275.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/8 Rpt: 11/23	
2	FILER NAME Wilson Cour	nty Republican Women		3	Filer ID (Ethics Commission 00055452	n Filers)
4	Date 11/13/2024			7	Amount of Contribution (\$)	\$30.00
_	Dringing! goog	San Antonio, TX 78223	O Employer (Coal not victions			
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 11/13/2024	Full name of contributor			Amount of Contribution (\$)	\$30.00
	Dringing oggu	Floresville, TX 78114	Employer (See Instructions			
Principal occupation / Job title (See Instructions) Self-Employed Employer (See Instructions))		
	Date 09/10/2024	Full name of contributor)		Amount of Contribution (\$)	\$20.00
		LA VERNIA, TX 78121				
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_wilson county Contributor address; City; State; Zip Code Floresville, TX 78114)		Amount of Contribution (\$)	\$350.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

SCHEDULE F1

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Cabadula F1:	,
1 Total pages Schedule F1: Sch: 1/12 Rpt: 12/23	2 FILER NAME3 Filer ID(Ethics Commission Filers)Wilson County Republican Women00055452
4 Date	5 Payee name
08/18/2024	Bland, Jane
00/10/2024	
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	1005 Congress Ave #400
Expenditure from corporate funds	Austin, TX 78701
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Sampaigh Bohaton
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff 6/01	
Date	Payee name
08/18/2024	Brissette, Lori Massey
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	522 Avenue A #1207e
Ψ500.00	322 AVCING A #12076
Expenditure from	
corporate funds	San Antonio, TX 78215
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign Donation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
12/09/2024	First Lutheran Church
Amount (\$)	Payee address; City; State; Zip Code
\$240.00	1406 6th Street
Evpanditura from	
Expenditure from corporate funds	Floresville, TX 78114
PURPOSE	(1) 5
OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	MEETING LOCATION EXPENSE
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/12 Rpt: 13/23	Wilson County Republican Women 00055452
4 Date	5 Payee name
09/24/2024	Harlande Clarke Check
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$105.12	15955 La Cantera
Expenditure from corporate funds	San Antonio, TX 78256
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	CHECKS
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/22/2024	Jack's Cafe
Amount (\$)	Payee address; City; State; Zip Code
\$30.01	507 10th St
Expenditure from corporate funds	Floresville, TX 78114
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense MARGARET WILSON & KITTY PHILLIPS
	SPEAKER LUNCH
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
07/16/2024	Jacks Cafe
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	507 Tenth St
Expenditure from corporate funds	Floresville, TX 78114
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Venue for Membership Drive
	venue for membership brive
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/12 Rpt: 14/23	Wilson County Republican Women 00055452
4 Date	5 Payee name
10/22/2024	MEYER, SHARON
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$181.74	PO BOX 508
- "	
Expenditure from corporate funds	STOCKDALE, TX 78160
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	CONSTITUTION DAY
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	the state of the s
Date	Davies name
07/08/2024	Payee name Manen, Buby
	Manen, Ruby
Amount (\$)	Payee address; City; State; Zip Code
\$38.28	860 Paddy Rd
Expenditure from corporate funds	Floresville, TX 78114
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Literacy Program
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
08/18/2024	Manen, Ruby
Amount (\$)	Payee address; City; State; Zip Code
\$83.33	860 Paddy Rd
Expenditure from corporate funds	Floresville, TX 78114
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Reimbursement for lunch ticket for tribute to women
	for WCRW honoree, Sarah Gella
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

Solicitation/Fundraising Expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Transportation Equipment & Related Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/12 Rpt: 15/23 Wilson County Republican Women 00055452 4 Date Payee name 08/18/2024 Miller, Joyce 6 Amount (\$) Payee address; City; State; Zip Code \$126.65 1616 CR 357 Expenditure from Adkins, TX 78101 corporate funds **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Printing Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Ink Cartridge Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/18/2024 Miller, Joyce Amount (\$) Payee address; City; State; Zip Code \$36.06 1616 CR 357 Expenditure from Adkins, TX 78101 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for Guest Speaker Lucy Trainer & Mata Orth Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/02/2024 Monreal, Stephanie Amount (\$) Payee address: City; State; Zip Code \$46.81 2163 CR 357 Expenditure from corporate funds Floresville, TX 78114 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense COFFEE BAR FOR CONTITUTION DAY DINNER Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

nt Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
OTHER (enter a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/12 Rpt: 16/23	Wilson County Republican Women 00055452
4 Date	5 Payee name
08/18/2024	Parker, Gina
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	5015 Fort Avenue
Expenditure from	
corporate funds	Waco, TX 76710
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Donation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/14/2024	SHEARER, JOCELYN
Amount (\$)	Payee address; City; State; Zip Code
\$198.00	1801 BENTWOOD DR
4 200.00	
Expenditure from corporate funds	Floresville, TX 78114
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	CLEAN & FOLD 18 TABLECLOTHS FOR CDC DINNER
2 1 2 2 1 1 2 1 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/18/2024	Stewart, Jim
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 356
Expenditure from corporate funds	Stockdale, TX 78160
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign Donation
Complete CNII V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenolder/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/12 Rpt: 17/23	Wilson County Republican Women 00055452
4 Date	5 Payee name
07/16/2024	TFRW
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25.30	PO Box 171146
Expenditure from corporate funds	Austin, TX 78717
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Membership Dues
	Weinbership Dues
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
08/18/2024	TFRW
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	PO Box 171146
Expenditure from corporate funds	Austin, TX 78717
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense
	Check if Austin, TX, officeholder living expense
	TFRW Tribute to Women - Club Table Sponsor
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u>'</u>	
Date	Payee name
07/22/2024	TFRW
Amount (\$)	Payee address; City; State; Zip Code
\$50.60	PO Box 171146
- "	
Expenditure from corporate funds	Austin, TX 78717
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Dues
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 7/12 Rpt: 18/23	Wilson County Republican Women	00055452
4	Date	5 Payee name	<u> </u>
	07/18/2024	TFRW	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$25.30	PO Box 171146	
	- "		
	Expenditure from corporate funds	Austin, TX 78717	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense Dues
			Dues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
•	expenditure to benefit C/O		Office field
	Date	Davies name	
	08/26/2024	Payee name TFRW	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$20.20	PO Box 171146	
	Ψ20.20	1 0 00% 171140	
	Expenditure from corporate funds	Austin, TX 78717	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	08/28/2024	TFRW	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5.10	PO Box 171146	
	Expenditure from corporate funds	Austin, TX 78717	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE		Check if Austin, TX, officeholder living expense
			FEES
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/W The Instruction Guide explains how to co	/ages/Contract Labor OTHER (enter a category not listed above) mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 8/12 Rpt: 19/23	Wilson County Republican Women	00055452
4 Date	5 Payee name	
08/29/2024	TFRW	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$50.60	PO Box 171146	
Expenditure from corporate funds	Austin, TX 78717	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense DUES
		5023
9 Complete ONLY if direct	Candidate/Officeholder name Office sour	aht Office held
9 Complete ONLY if direct expenditure to benefit C/O		gnit Onice neid
Date	Payee name	
09/09/2024	TFRW	
Amount (\$)	Payee address; City; State; Zip Co	de
\$25.30	PO Box 171146	
Expenditure from corporate funds	Austin, TX 78717	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		DUES
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght Office held
experientare to benefit 6/6		
Date	Payee name	
08/28/2024	TFRW	
Amount (\$)	Payee address; City; State; Zip Co	de
\$0.53	PO Box 171146	
, , , , ,		
Expenditure from	Augtin TV 70717	
corporate funds	Austin, TX 78717	
PURPOSE OF	,	(b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		8/28/2024 CORRECTION
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O	•	grit Onice Held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/12 Rpt: 20/23	Wilson County Republican Women 00055452
4 Date	5 Payee name
11/12/2024	TFRW
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$708.40	PO Box 171146
Expenditure from corporate funds	Austin, TX 78717
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense DUES
	DUES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to benefit eye	<u> </u>
Date	Payee name
11/13/2024	TFRW
Amount (\$)	Payee address; City; State; Zip Code
\$20.20	PO Box 171146
, , ,	
Expenditure from corporate funds	Austin, TX 78717
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	2025 SERVICE CHARGE
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to benefit 6/01	<u>'</u>
Date	Payee name
09/17/2024	UPS STORE #5178
Amount (\$)	Payee address; City; State; Zip Code
\$116.18	923 10TH ST STE 101
4110.10	020 2011 01 012 202
Expenditure from corporate funds	Floresville, TX 78114
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	CONSTITUTION DAY CELEBRATION EVENT
	PROGRAM
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to cor	ages/Contract Labor	, , , , , , , , , , , , , , , , , , , ,
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 10/12 Rpt: 21/23	Wilson County Republican Women		00055452
4 Date	5 Payee name		•
12/19/2024	WALMART		
6 Amount (\$)	7 Payee address; City; State; Zip Coo	le	
\$134.97	305 10th Street		
Expenditure from corporate funds	Floresville, TX 78114		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Event Expense	=	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense
		ш	Γ (CUPCAKES) FOR WCRP/WCRW
			IAS PARTY
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sout	ht	Office held
experiditure to benefit C/Oi	7		
Date	Payee name		
11/12/2024	WCRP		
Amount (\$)	Payee address; City; State; Zip Coo	le	
\$83.33	860 Paddy Rd		
Expenditure from corporate funds	Floresville, TX 78114		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Event Expense	=	avel outside of Texas. Complete Schedule T.
			ustin, TX, officeholder living expense T FOR LUNCHEON TICKET FOR
			E SARAH GELLA WAS EXPENSED TO
Complete ONLY if direct	Candidate/Officeholder name Office sou	ıht	Office held
expenditure to benefit C/O	•	,	
Date	Payee name		
09/13/2024	Willis, Anna		
Amount (\$)	Payee address; City; State; Zip Coo	<u> </u>	
\$87.64	432 Bonnieview		
φοτ.σ-	402 Bollilleview		
Expenditure from corporate funds	San Antonio, TX 78223		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Event Expense	<u> </u>	avel outside of Texas. Complete Schedule T.
		SPEAKER	ustin, TX, officeholder living expense
		JF EAINER	COII 13
Complete ONLY if direct	Candidate/Officeholder name Office sou	ıht	Office held
expenditure to benefit C/Ol		,,,,	Cinice riciu

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 11/12 Rpt: 22/23	Wilson County Republican Women 00055452
4 Date	5 Payee name
09/13/2024	Willis, Anna
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$45.00	432 Bonnieview
Expenditure from corporate funds	San Antonio, TX 78223
·	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	SPEAKER FOOD
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/02/2024	Willis, Anna
Amount (\$)	Payee address; City; State; Zip Code
\$30.00	432 Bonnieview
Expenditure from corporate funds	San Antonio, TX 78223
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense GUEST SPEAKER FOR WCRW
	GOLST SPLAKEN FOR WORW
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	
Date	Payee name
07/08/2024	Wilson County Expo & Community Center
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	435 US Hwy 97 East
Ψ2,000.00	100 00 1111 01 240.
Expenditure from corporate funds	Floresville, TX 78114
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Constitutional Day Rental
Complete CNII V if direct	Candidate/Officeholder name Office sought Office hold
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: Sch: 12/12 Rpt: 23/23 Wilson County Republican Women 000055452 4 Date 10/22/2024 F1 Payee name Wilson County News 6 Amount (\$) 7 Payee address; City; State; Zip Code \$1,206.35 1012 C Street					OTHER (enter a category not listed above)
Sch: 12/12 Rpt: 23/23 Wilson County Republican Women 00055452 4 Date	•		Instruction Guide explains how to	complete this form.	
4 Date 10/22/2024 5 Payee name Wilson County News 6 Amount (\$) \$1,206.35 7 Payee address; City; State; Zip Code 1012 C Street	1 Total pages Schedule F1:	2 FILER NAME			3 Filer ID (Ethics Commission File
10/22/2024 Wilson County News 6 Amount (\$) 7 Payee address; City; State; Zip Code \$1,206.35 1012 C Street	Sch: 12/12 Rpt: 23/23	Wilson County R	Republican Women		00055452
10/22/2024 Wilson County News 6 Amount (\$) 7 Payee address; City; State; Zip Code \$1,206.35 1012 C Street	4 Date	5 Payee name			
\$1,206.35 1012 C Street	10/22/2024		lews		
Expenditure from	6 Amount (\$)	7 Payee address;	City; State; Zip	Code	
Expenditure from	\$1,206.35	1012 C Street			
Expenditure from corporate funds Floresville, TX 78114	, ,				
	Expenditure from corporate funds	Floresville, TX 7	8114		
8 PURPOSE (a) Category (a) Category (b) December (b) December (c)	8 PURPOSE	(a) Category (See Cate	egories listed at the top of this schedule)	(b) Description	
(See Categories listed at the top of this schedule)				Check if trav	el outside of Texas. Complete Schedule T.
OF Advertising Expense Check if travel outside of Texas. Complete Schedule T.	EXPENDITORE			Check if Aus	tin, TX, officeholder living expense
(See Categories listed at the top of this scriedule)				STATEMEN	NT NO 22483
OF EXPENDITURE Advertising Expense Advertising Expense Check if travel outside of Texas. Complete Schedule T.					
OF EXPENDITURE Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	Complete ONLY if direct expenditure to benefit C/O		der name Office	sought	Office held
OF EXPENDITURE Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense STATEMENT NO 22483	Date	Payee name			
Advertising Expense Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense STATEMENT NO 22483 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	10/02/2024	1	atering		
OF EXPENDITURE Advertising Expense Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense STATEMENT NO 22483 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name				Code	
Advertising Expense Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense STATEMENT NO 22483 Check if Austin, TX, officeholder living expense STATEMENT NO 26483 Date Payee name 10/02/2024 Witte's BBQ & Catering		_		Code	
Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense STATEMENT NO 22483 Check if Austin, TX, officeholder living expense STATEMENT NO 22483 Office held expenditure to benefit C/OH Date	\$1,859.00	12153 US HWY 8	37 VV.		
Advertising Expense Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense STATEMENT NO 22483 Check if Austin, TX, officeholder living expense STATEMENT NO 26483 Date Payee name 10/02/2024 Witte's BBQ & Catering	Evponditure from				
OF EXPENDITURE Advertising Expense Advertising Expense Office sought Office sought Date 10/02/2024 Amount (\$) Payee address; City; State; Zip Code \$1,859.00 Advertising Expense Office states in the by bit his schedule) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense STATEMENT NO 22483 Office held Office held Office held Office held Payee name Witte's BBQ & Catering Amount (\$) Payee address; City; State; Zip Code \$1,859.00 12153 US Hwy 87 W.	corporate funds	La Vernia, TX 78	3121		
Advertising Expense Advertising Expense Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense STATEMENT NO 22483 Complete ONLY if direct expenditure to benefit C/OH Date 10/02/2024 Payee name Witte's BBQ & Catering Amount (\$) Payee address; City; State; Zip Code \$1,859.00 Expenditure from Expenditure from	PURPOSE	(a) Category (See Cate	egories listed at the top of this schedule)	(b) Description	
Advertising Expense Advertisi	OF		,	Check if trav	el outside of Texas. Complete Schedule T.
Advertising Expense Advertisi		Fvent Expense			
Advertising Expense Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense STATEMENT NO 22483 Page name 10/02/2024 Witte's BBQ & Catering Amount (\$) Payee address; City; State; Zip Code \$1,859.00 \$1,859.00 La Vernia, TX 78121 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description		Event Expense		Check if Aus	tin, TX, officeholder living expense
Advertising Expense Advertising Expense Advertis At the top of this schedule Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.		Event Expense		_ _	
Advertising Expense Advertising Expense at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		Event Expense		_ _	
Advertising Expense Office Adverting Advertise Adverting Advertise Advert	EXPENDITURE		Ider name Office	Сонтітит	ION DAY CATERING
Advertising Expense Advertising Expense Advertising Expense Check if ravel outside of Texas. Complete Schedule T.	EXPENDITURE Complete ONLY if direct	Candidate/Officehol	der name Office	Сонтітит	ION DAY CATERING
Advertising Expense Office Adverting Advertise Adverting Advertise Advert	EXPENDITURE Complete ONLY if direct	Candidate/Officehol	der name Office	Сонтітит	ION DAY CATERING
Advertising Expense Advertising Expense Advertising Expense Check if ravel outside of Texas. Complete Schedule T.	EXPENDITURE Complete ONLY if direct	Candidate/Officehol	lder name Office	Сонтітит	ION DAY CATERING
Advertising Expense Advertising Expense Advertising Expense Check if ravel outside of Texas. Complete Schedule T.	EXPENDITURE Complete ONLY if direct	Candidate/Officehol	der name Office	Сонтітит	ION DAY CATERING
Advertising Expense Advertising Expense Advertising Expense Check if ravel outside of Texas. Complete Schedule T.	EXPENDITURE Complete ONLY if direct	Candidate/Officehol	der name Office	Сонтітит	ION DAY CATERING
Advertising Expense Advertising Expense Advertising Expense Check if ravel outside of Texas. Complete Schedule T.	EXPENDITURE Complete ONLY if direct	Candidate/Officehol	der name Office	Сонтітит	ION DAY CATERING
Advertising Expense Advertising Expense Advertising Expense Check if ravel outside of Texas. Complete Schedule T.	EXPENDITURE Complete ONLY if direct	Candidate/Officehol	der name Office	Сонтітит	ION DAY CATERING
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