

# 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) 00016322	2 Total pages filed: 92	
3 COMMITTEE NAME Ector County Republican Women's Club			OFFICE USE ONLY	
			Date Received ELECTRONICALLY FILED 07/11/2025	
			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			
	P.O. Box 14537			
	Odessa, TX 79768			
	Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI			
	Ms. Julie			
	NICKNAME LAST SUFFIX			
	Adams			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE			
	P.O. Box 14537 Odessa, TX 79768			
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			
	P.O. Box 14537 Odessa, TX 79768			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (432) 664-3877			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)			
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination			
10 PERIOD COVERED	<input type="checkbox"/> Runoff			
11 ELECTION	Month Day Year			
	01/01/2025 THROUGH 06/30/2025			
ELECTION DATE				
Month Day Year				
ELECTION TYPE				
<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other				
<input type="checkbox"/> General <input type="checkbox"/> Special				

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# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Ector County Republican Women's Club	<b>13 Filer ID</b> (Ethics Commission Filers) 00016322
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 26,533.93
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 0.00
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 7,767.43
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

## 16 AFFIDAVIT

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

Ms. Julie Adams

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****FORM GPAC**  
**COVER SHEET PG 3**  
3 of 92

<b>17 COMMITTEE NAME</b> Ector County Republican Women's Club		<b>18 Filer ID</b> (Ethics Commission Filers) 00016322
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 26,533.93
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
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 checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 0.00
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 19,360.10
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/71 Rpt: 4/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 05/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVAREZ, IRIS <hr/> <b>6</b> Contributor address; City; State; Zip Code  GARDENDALE, TX 79758	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) RETIRED		<b>9</b> Employer (See Instructions)
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMONETT, ASHLEIGH <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) ASSISTANT EX. DIRECTOR		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMONETT, ASHLEIGH <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) ASSISTANT EX. DIRECTOR		Employer (See Instructions)
Date 03/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMONETT, ASHLEIGH <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) ASSISTANT EX. DIRECTOR		Employer (See Instructions)
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMONETT, ASHLEIGH <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) ASSISTANT EX. DIRECTOR		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/71 Rpt: 5/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 05/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMONETT, ASHLEIGH <hr/> <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79762	<b>7</b> Amount of Contribution (\$)  \$31.02
<b>8</b> Principal occupation / Job title (See Instructions) ASSISTANT EX. DIRECTOR		<b>9</b> Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANGLELEY, LINDA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions)
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANGLELEY, LINDA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79765	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions)
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANGLELEY, LINDA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions)
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARANDA, GABRIELA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79763	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/71 Rpt: 6/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Patti (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79765	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, TIFFANY <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) MEALS ON WHEELS		Employer (See Instructions)
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, PATSY <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD, DEANNA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JAN <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79761	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/71 Rpt: 7/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JET <b>6</b> Contributor address; City; State; Zip Code  GARDENDALE, TX 79758	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) MANAGER		<b>9</b> Employer (See Instructions)
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, LAYNY Contributor address; City; State; Zip Code  GARDENDALE, TX 79758	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) COLLEGE STUDENT		Employer (See Instructions)
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, STEVE Contributor address; City; State; Zip Code  ODESSA, TX 79761	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, STEVE Contributor address; City; State; Zip Code  ODESSA, TX 79761	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber, Gregory (Mr.) Contributor address; City; State; Zip Code  Gardendale, TX 79758	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) County Attorney		Employer (See Instructions) Ector County

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/71 Rpt: 8/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber, Gregory (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Gardendale, TX 79758	<b>7</b> Amount of Contribution (\$)  \$38.86
<b>8</b> Principal occupation / Job title (See Instructions) County Attorney		<b>9</b> Employer (See Instructions) Ector County
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber, Gregory (Mr.) <hr/> Contributor address; City; State; Zip Code  Gardendale, TX 79758	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) County Attorney		Employer (See Instructions) Ector County
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bird, Alma (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Melissa (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$38.86
Principal occupation / Job title (See Instructions) Mortgage Loan Officer		Employer (See Instructions) Bank
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, B.J. (Miss) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) Private Practice

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/71 Rpt: 9/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 05/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, B.J. (Miss) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79761	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) lawyer		<b>9</b> Employer (See Instructions) Private Practice
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, SHELLY <hr/> Contributor address; City; State; Zip Code  GARDENDALE, TX 79758	Amount of Contribution (\$)  \$38.86
Principal occupation / Job title (See Instructions) BDD		Employer (See Instructions)
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, SHELLY <hr/> Contributor address; City; State; Zip Code  GARDENDALE, TX 79758	Amount of Contribution (\$)  \$31.07
Principal occupation / Job title (See Instructions) BDD		Employer (See Instructions)
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryson, Christi <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Adult Probation		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryson, Christi <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Adult Probation		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/71 Rpt: 10/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryson, Christi <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) Adult Probation		<b>9</b> Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckann, LTD <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79761	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions)
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulger, Billie <hr/> Contributor address; City; State; Zip Code  Midland, TX 79707	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdette, Larry <hr/> Contributor address; City; State; Zip Code  Midland, TX 79705	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAUDLE, CRAIG <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79761	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) CHEMICAL TECH		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/71 Rpt: 11/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVEZ, CARLOS <hr/> <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79764	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) JUSTICE OF PEACE JUDGE PCT 1		<b>9</b> Employer (See Instructions)
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calloway, CHARLES (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calloway, Judy (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calloway, Judy (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calloway, Judy (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$288.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/71 Rpt: 12/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Sheri <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79761	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Faye <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Faye <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Kathleen <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$79.32
Principal occupation / Job title (See Instructions) Housewife		Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft, Lanell (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79764	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/71 Rpt: 13/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft, Lanell (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79764	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions)
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronk, Carolyn <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) Cosmetics Owner		Employer (See Instructions) Merle Norman
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronk, Carolyn <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Cosmetics Owner		Employer (See Instructions) Merle Norman
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronk, Carolyn <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) Cosmetics Owner		Employer (See Instructions) Merle Norman
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crutcher, Lauri (Mrs.) <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/71 Rpt: 14/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crutcher, Linda (Mrs.) <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79765	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crutcher, Lori (Mrs.) Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crutcher, Lori (Mrs.) Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crutcher, Lori (Mrs.) Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crutcher, Lori (Mrs.) Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/71 Rpt: 15/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 05/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crutcher, Lori (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79762	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darville, Mark (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79798	Amount of Contribution (\$)  \$79.32
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions) Darville Co
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darville, Mark (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79798	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions) Darville Co
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darville, Mark (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79798	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions) Darville Co
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darville, Mark (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79798	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions) Darville Co

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/71 Rpt: 16/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darville, Mark (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79798	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) business owner		<b>9</b> Employer (See Instructions) Darville Co
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Lori (Mrs.) <hr/> Contributor address; City; State; Zip Code  Midland, TX 79702	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Interior Designer		Employer (See Instructions) Self employed
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Pat (Mr.) <hr/> Contributor address; City; State; Zip Code  Midland, TX 79702	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Interior Designer		Employer (See Instructions) Self employed
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrick, Donna <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79764	Amount of Contribution (\$)  \$103.21
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrick, Donna <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79764	Amount of Contribution (\$)  \$95.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/71 Rpt: 17/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrick, Donna <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79764	<b>7</b> Amount of Contribution (\$)  \$95.25
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrick, Donna <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79764	Amount of Contribution (\$)  \$95.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrick, Donna <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79764	Amount of Contribution (\$)  \$95.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EASLEY, SARA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79763	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EOFF, TOBY <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79760	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/71 Rpt: 18/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edgmom, Theresa (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79765	<b>7</b> Amount of Contribution (\$)  \$95.25
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions) Higginbottan Edgmon Ins
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edgmom, Theresa (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Higginbottan Edgmon Ins
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edgmon, Theresa (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$93.40
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Higginbottan Edgmon Ins
Date 01/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Brenna <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Brenna <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$60.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/71 Rpt: 19/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Kirk <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79765	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Kirk <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$60.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emfinger, Vickie (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emfinger, Vickie (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 03/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emfinger, Vickie (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/71 Rpt: 20/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eoff, Sondra (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79765	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Owner		<b>9</b> Employer (See Instructions) Odessa Pump
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAIR, BOB <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$220.68
Principal occupation / Job title (See Instructions) PRESIDENT RINO K&K		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAIR, BOB <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) PRESIDENT RINO K&K		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fair, Debbie (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions) business owner
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fawcett, Dustin (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) MCH

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/71 Rpt: 21/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fawcett, Dustin (Mr.) <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) Sales		<b>9</b> Employer (See Instructions) MCH
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fawcett, Jennifer (Mrs.) Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) MCH
Date 03/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Sherry (Mrs.) Contributor address; City; State; Zip Code  ODESSA, TX 79761-0000	Amount of Contribution (\$)  \$127.10
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions)
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, JANE Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, JANE Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/71 Rpt: 22/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, JANE <hr/> <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79762	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) RETIRED		<b>9</b> Employer (See Instructions)
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, BROOKE <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) OPERATIONS MANAGER		Employer (See Instructions)
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGSTON, BELLA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79761	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) UTPB DISPATCH		Employer (See Instructions)
Date 01/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Angela (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$95.25
Principal occupation / Job title (See Instructions) Adm Assistant		Employer (See Instructions) Oilfield Services
Date 01/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Angela (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Adm Assistant		Employer (See Instructions) Oilfield Services

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/71 Rpt: 23/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Michael (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79765	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Adm Assistant		<b>9</b> Employer (See Instructions) Oilfield Services
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerber, Loretta <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillham, lola <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$38.86
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillham, lola <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillham, Richard ( Dick) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$38.86
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/71 Rpt: 24/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillham, Richard ( Dick) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillham, Richard ( Dick) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$80.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Melissa <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79764	Amount of Contribution (\$)  \$38.86
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 01/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregston, Traci (Ms.) <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79761-0000	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Barber		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregston, Traci (Ms.) <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79761-0000	Amount of Contribution (\$)  \$39.51
Principal occupation / Job title (See Instructions) Barber		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/71 Rpt: 25/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregston, Traci (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79761-0000	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) Barber		<b>9</b> Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregston, Traci (Ms.) <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79761-0000	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Barber		Employer (See Instructions)
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Teresa <hr/> Contributor address; City; State; Zip Code  Big Spring, TX 79720	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Heather (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79768	Amount of Contribution (\$)  \$576.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self-employed
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Heather (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79768	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self-employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/71 Rpt: 26/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Taylor <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79765	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Owner		<b>9</b> Employer (See Instructions) self employed
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Taylor <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$32.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) self employed
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, LINDA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79764	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) INSURANCE BROKER		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, LINDA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79764	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) INSURANCE BROKER		Employer (See Instructions)
Date 03/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, LINDA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79764	Amount of Contribution (\$)  \$60.00
Principal occupation / Job title (See Instructions) INSURANCE BROKER		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/71 Rpt: 27/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, LINDA <hr/> <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79764	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) INSURANCE BROKER		<b>9</b> Employer (See Instructions)
Date 04/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, LINDA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79764	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) INSURANCE BROKER		Employer (See Instructions)
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKINS, KEN <hr/> Contributor address; City; State; Zip Code  MIDLAND, TX 79705	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) REP. SPARKS		Employer (See Instructions)
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYS, DWAYNE <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79764	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) BUILDING INSPECTOR		Employer (See Instructions)
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICK, AMY <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/71 Rpt: 28/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICK, CAL <b>6</b> Contributor address; City; State; Zip Code ODESSA, TX 79762	<b>7</b> Amount of Contribution (\$) \$63.40
<b>8</b> Principal occupation / Job title (See Instructions) ATTORNEY		<b>9</b> Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICK, CAL Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, KLATA Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) ACCOUNT MGR		Employer (See Instructions)
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, KLATA Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) ACCOUNT MGR		Employer (See Instructions)
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKS, RHONDA Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) ACCOUNT MGR		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/71 Rpt: 29/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHTOWER, DEBBIE <hr/> <b>6</b> Contributor address; City; State; Zip Code  MIDLAND, TX 79707	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) DIRECTOR		<b>9</b> Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, WR BRO <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, WR BRO <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOGGARD, KENDRA <hr/> Contributor address; City; State; Zip Code  MIDLAND, TX 79706	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions)
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOGGARD, KENDRA <hr/> Contributor address; City; State; Zip Code  MIDLAND, TX 79706	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/71 Rpt: 30/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 05/22/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOMSEY, KENDALL <hr/> <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79765	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) LASH TECH		<b>9</b> Employer (See Instructions)
Date 04/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWELL, JANEL <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79763	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 04/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWELL, JANEL <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79763	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWELL, JANEL <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79763	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HURT, TONY <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79765	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/71 Rpt: 31/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hallmark, Don (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Appraisal		<b>9</b> Employer (See Instructions) self employed
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hallmark, Priscilla (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hand, Lisa <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haney, Linda <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$36.53
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danora (Mrs.) <hr/> Contributor address; City; State; Zip Code  Gardendale, TX 79758	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/71 Rpt: 32/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danora (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Gardendale, TX 79758	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danora (Mrs.) <hr/> Contributor address; City; State; Zip Code  Gardendale, TX 79758	Amount of Contribution (\$)  \$38.86
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danora (Mrs.) <hr/> Contributor address; City; State; Zip Code  Gardendale, TX 79758	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danora (Mrs.) <hr/> Contributor address; City; State; Zip Code  Gardendale, TX 79758	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Jolene (Ms.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79764	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/71 Rpt: 33/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Tammy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) School Board		<b>9</b> Employer (See Instructions) Self Employes
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Tammy <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) School Board		Employer (See Instructions) Self Employes
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Judith (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Self Employed
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Judith (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$32.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Self Employed
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Judith (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/71 Rpt: 34/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Judith (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79761	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions) Self Employed
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Judith (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Self Employed
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynie, Sonya (Ms.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self employed
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynie, Sonya (Ms.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self employed
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynie, Sonya (Ms.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/71 Rpt: 35/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynie, Sonya (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79761	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) artist		<b>9</b> Employer (See Instructions) self employed
Date 04/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynie, Sonya (Ms.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self employed
Date 04/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynie, Sonya (Ms.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self employed
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hays, Debi (Judge) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79764-1203	Amount of Contribution (\$)  \$288.00
Principal occupation / Job title (See Instructions) County Judge		Employer (See Instructions) Ector County
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensley, Jan <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/71 Rpt: 36/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Mary (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hood , Karen (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79705	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) County Tax Assessor		Employer (See Instructions) Midland County
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurt, Sherry (Mrs.) <hr/> Contributor address; City; State; Zip Code  Midland, TX 79711	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) none
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurt, Sherry (Mrs.) <hr/> Contributor address; City; State; Zip Code  Midland, TX 79711	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) none
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurt, Sherry (Mrs.) <hr/> Contributor address; City; State; Zip Code  Midland, TX 79711	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) none

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/71 Rpt: 37/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GARY <b>6</b> Contributor address; City; State; Zip Code ODESSA, TX 79761	<b>7</b> Amount of Contribution (\$) \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) RETIRED		<b>9</b> Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GARY Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$31.07
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GARY Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$244.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GARY Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GARY Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/71 Rpt: 38/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, LAURIE <hr/> <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79761	<b>7</b> Amount of Contribution (\$)  \$288.00
<b>8</b> Principal occupation / Job title (See Instructions) NON-PROFIT EXECUTIVE		<b>9</b> Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, SUSAN <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79761	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) ACCT MGR		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, SUSAN <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79761	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) ACCT MGR		Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Robin (Mrs.) <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joiner, La Nita <hr/> Contributor address; City; State; Zip Code  Midland, TX 79707	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/71 Rpt: 39/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Sheryl (Ms.) <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Sheryl (Ms.) Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones , Tammy L (Ms.) Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$39.51
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) ECISD
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones , Tammy L (Ms.) Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) ECISD
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones , Tammy L (Ms.) Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) ECISD

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/71 Rpt: 40/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julian, Deborah <hr/> <b>6</b> Contributor address; City; State; Zip Code  Midland, TX 79710	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Sales		<b>9</b> Employer (See Instructions) Anderson Homes
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julian, Deborah <hr/> Contributor address; City; State; Zip Code  Midland, TX 79710	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Anderson Homes
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELM, DEREK <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) LANDSCAPER		Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, Christy <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, DALLAS <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/71 Rpt: 41/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, DALLAS <hr/> <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79765	<b>7</b> Amount of Contribution (\$)  \$60.00
<b>8</b> Principal occupation / Job title (See Instructions) TEACHER		<b>9</b> Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINNAIRD, PATTY <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79761	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINNAIRD, PATTY <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79761	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kappauf, Patti <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79763	Amount of Contribution (\$)  \$36.53
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelm, Donna (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$288.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/71 Rpt: 42/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimbrell, Pam (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79762	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACY, RHONDA <hr/> Contributor address; City; State; Zip Code  MIDLAND, TX 79705	Amount of Contribution (\$)  \$38.86
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANCE, JENNIFER <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions)
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANCE, SAMUEL <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$77.82
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, JIMMY <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/71 Rpt: 43/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, YOULANDA <hr/> <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79762	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) RETIRED		<b>9</b> Employer (See Instructions)
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, YOULANDA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, YOULANDA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$60.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, YOULANDA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$80.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEONARD, VALARIE <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) CONTROLLER		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/71 Rpt: 44/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEONARD, VALARIE <hr/> <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79762	<b>7</b> Amount of Contribution (\$)  \$95.25
<b>8</b> Principal occupation / Job title (See Instructions) CONTROLLER		<b>9</b> Employer (See Instructions)
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEONARD, VALARIE <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) CONTROLLER		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, RONNIE <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$93.40
Principal occupation / Job title (See Instructions) RANCHER		Employer (See Instructions)
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, RONNIE <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$116.78
Principal occupation / Job title (See Instructions) RANCHER		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, TRYON (Mr.) <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79763	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Law Firm Partner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/71 Rpt: 45/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landgraf, Brooks (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Tx State Representative		<b>9</b> Employer (See Instructions) State of Texas
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landgraf, John (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761-3429	Amount of Contribution (\$)  \$95.25
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) self employed
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landgraf, John (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761-3429	Amount of Contribution (\$)  \$95.25
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) self employed
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landgraf, John (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761-3429	Amount of Contribution (\$)  \$95.25
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) self employed
Date 03/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landgraf, John (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761-3429	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) self employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 43/71 Rpt: 46/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landgraf, John (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79761-3429	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) Rancher		<b>9</b> Employer (See Instructions) self employed
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewallen, David <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewallen, David <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Trudy (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79763	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Trudy (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79763	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 44/71 Rpt: 47/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Trudy (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79763	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lively, Melanie <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Adminstrator Medical Practice		Employer (See Instructions) Dr Charles Lively
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lively, Melanie <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Adminstrator Medical Practice		Employer (See Instructions) Dr Charles Lively
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas , Martha (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$38.86
Principal occupation / Job title (See Instructions) Nurse / Professor		Employer (See Instructions) Midland College
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTEL, ANITA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79761	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 45/71 Rpt: 48/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYLONE, SAVANNAH <hr/> <b>6</b> Contributor address; City; State; Zip Code  MIDLAND, TX 79707	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) TEACHER		<b>9</b> Employer (See Instructions)
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOBLEY, TINA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) FINANCIAL ADVISOR		Employer (See Instructions)
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORALES, LESLIE (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79763	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) COLLEGE STUDENT		Employer (See Instructions)
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYSTER, JOANN <hr/> Contributor address; City; State; Zip Code  SAN ANTONIO, TX 78253	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauldin, Monica <hr/> Contributor address; City; State; Zip Code  Midland, TX 79706	Amount of Contribution (\$)  \$38.81
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 46/71 Rpt: 49/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Diann (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$63.40
<b>8</b> Principal occupation / Job title (See Instructions) Business Owner		<b>9</b> Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Diann (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Diann (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 04/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Diann (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Diann (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 47/71 Rpt: 50/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeese, Deneisa <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$77.82
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeese, Deneisa <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$62.24
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melton, J'Nevelyn (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$38.86
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melton, J'Nevelyn (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melton, J'Nevelyn (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 48/71 Rpt: 51/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melton, J'Nevelyn (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79761	<b>7</b> Amount of Contribution (\$)  \$38.86
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Midkiff, Jeanette <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Property Mgmt		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Midland County Republican Women <hr/> Contributor address; City; State; Zip Code  Midland, TX 79701	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jill (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$288.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Odessa Housing FINANCE
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jill (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$560.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Odessa Housing FINANCE

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 49/71 Rpt: 52/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milson, Karla (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milson, Karla (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minor, Rachel (Ms.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) First Tier Construction
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minor, Rachel (Ms.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) First Tier Construction
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Nancy (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79764	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 50/71 Rpt: 53/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Nancy (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79764	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nabarrette, Chris (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Oilfield		Employer (See Instructions)
Date 01/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nabarrette, Jaye (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Administrative Asst.		Employer (See Instructions) Wood Foundation
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nabarrette, Jaye (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Administrative Asst.		Employer (See Instructions) Wood Foundation
Date 04/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nabarrette, Jaye (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Administrative Asst.		Employer (See Instructions) Wood Foundation

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 51/71 Rpt: 54/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Vicki <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79765	<b>7</b> Amount of Contribution (\$)  \$31.07
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Vicki Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naverrette, Guadalupe Contributor address; City; State; Zip Code  Odessa, TX 79766	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Ector County District Clerk		Employer (See Instructions)
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naverrette, Guadalupe Contributor address; City; State; Zip Code  Odessa, TX 79766	Amount of Contribution (\$)  \$38.81
Principal occupation / Job title (See Instructions) Ector County District Clerk		Employer (See Instructions)
Date 01/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Brenda (Mrs.) Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 52/71 Rpt: 55/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Brenda (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions)
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Brenda (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Brenda (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Brenda (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Brenda (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 53/71 Rpt: 56/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nyborg, Williams (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79765	<b>7</b> Amount of Contribution (\$)  \$63.40
<b>8</b> Principal occupation / Job title (See Instructions) Business Owner		<b>9</b> Employer (See Instructions) Self Employed
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nyborg, Williams (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nyborg, Williams (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nyborg, Williams (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nyborg, Williams (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 54/71 Rpt: 57/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Carl (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Sue (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peden, Deanna <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$68.38
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peden, Deanna <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Betty (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 55/71 Rpt: 58/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Cindy (Mrs.) <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$63.40
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions)
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Cindy (Mrs.) Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 02/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Cindy (Mrs.) Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 02/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Richard (Mr.) Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$36.53
Principal occupation / Job title (See Instructions) Plumber		Employer (See Instructions) Service Master
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ponce, Gracela (Mrs.) Contributor address; City; State; Zip Code  Odessa, TX 79763	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 56/71 Rpt: 59/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ponce, Gracela (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79763	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Candy (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) MCH
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quiroz, Krista (Ms.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Office Manger		Employer (See Instructions) LCA Inc
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, ANNETTE <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$38.86
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYES, ELFREDA (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 57/71 Rpt: 60/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHODES, MARCY (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  ANDREWS, TX 79714	<b>7</b> Amount of Contribution (\$)  \$325.00
<b>8</b> Principal occupation / Job title (See Instructions) INDEPENDENT SCENTSY CONSULTANT		<b>9</b> Employer (See Instructions)
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHODES, TOMMY <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$60.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randell, Tawney <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Geospatial Analyst		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randell, Tawney <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$80.00
Principal occupation / Job title (See Instructions) Geospatial Analyst		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Betsy (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$576.00
Principal occupation / Job title (See Instructions) Treasurer		Employer (See Instructions) Metal Specialties Inc

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 58/71 Rpt: 61/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Betsy (Mrs.) <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) Treasurer		<b>9</b> Employer (See Instructions) Metal Specialties Inc
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Dub (Mr.) Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$32.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Mary Contributor address; City; State; Zip Code  ODESSA, TX 79769	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Mary Contributor address; City; State; Zip Code  ODESSA, TX 79769	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Edith (Mrs.) Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Business Owner

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 59/71 Rpt: 62/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, HERSHELL (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$36.53
<b>8</b> Principal occupation / Job title (See Instructions) Sales		<b>9</b> Employer (See Instructions)
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, LAURIE <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79765	Amount of Contribution (\$)  \$36.53
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, LAURIE <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, LAURIE <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, LAURIE <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 60/71 Rpt: 63/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, STEPHANIE <hr/> <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79763	<b>7</b> Amount of Contribution (\$)  \$63.40
<b>8</b> Principal occupation / Job title (See Instructions) SHAWSHACK K9 TRAINER		<b>9</b> Employer (See Instructions)
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, STEPHANIE <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79763	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) SHAWSHACK K9 TRAINER		Employer (See Instructions)
Date 04/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MARY <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRADLEY, KEN <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRADLEY, MARGARET <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 61/71 Rpt: 64/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRADLEY, MARGARET <hr/> <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79762	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) RETIRED		<b>9</b> Employer (See Instructions)
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Linda (Mrs.) <hr/> Contributor address; City; State; Zip Code  Gardendale, TX 79758	Amount of Contribution (\$)  \$36.53
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Linda (Mrs.) <hr/> Contributor address; City; State; Zip Code  Gardendale, TX 79758	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seglem, Marian (Ms.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seglem, Marian (Ms.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 62/71 Rpt: 65/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seglem, Marian (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79761	<b>7</b> Amount of Contribution (\$)  \$63.40
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seglem, Marian (Ms.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sewell, Canda (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, David <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79763	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions)
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Cami (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$127.10
Principal occupation / Job title (See Instructions) Housewife		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 63/71 Rpt: 66/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Cami (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79762	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Housewife		<b>9</b> Employer (See Instructions)
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Greg (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) Security State Bank
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Donna <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$38.86
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Margie (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smoot, Jonna (Miss) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Marketing Director		Employer (See Instructions) West TX National Bank

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 64/71 Rpt: 67/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Marilyn (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79763	<b>7</b> Amount of Contribution (\$)  \$38.86
<b>8</b> Principal occupation / Job title (See Instructions) Payroll/Collections		<b>9</b> Employer (See Instructions) Hughes Hot Shot Oilfield Srv.
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solley, Kole <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions)
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Jill <hr/> Contributor address; City; State; Zip Code  Midland, TX 79705	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Jill <hr/> Contributor address; City; State; Zip Code  Midland, TX 79705	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Kevin <hr/> Contributor address; City; State; Zip Code  Midland, TX 79705	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Business Owner/Politician		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 65/71 Rpt: 68/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Kevin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Midland, TX 79705	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Owner/Politician		<b>9</b> Employer (See Instructions)
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson, Jim <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surber, Wes (Mr.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retail Manager		Employer (See Instructions) Apple Electric
Date 03/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swinney, Jerrika <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JANICE <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$63.40
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 66/71 Rpt: 69/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JANICE <hr/> <b>6</b> Contributor address; City; State; Zip Code  ODESSA, TX 79762	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) ARTIST		<b>9</b> Employer (See Instructions)
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, STEVE <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuttle, Sherry (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VICKERS, LORRIE <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79765	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) INSURANCE		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VICKERS, LORRIE <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79765	Amount of Contribution (\$)  \$77.77
Principal occupation / Job title (See Instructions) INSURANCE		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 67/71 Rpt: 70/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Carol <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79765	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Carol <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Carol <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Carol <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Carol <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 68/71 Rpt: 71/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 05/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Carol <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79765	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Volker, Ann (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WORTHEN, BRENDA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WORTHEN, BRENDA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WORTHEN, BRENDA <hr/> Contributor address; City; State; Zip Code  ODESSA, TX 79762	Amount of Contribution (\$)  \$95.25
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 69/71 Rpt: 72/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 05/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walden, Melissa <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79761	<b>7</b> Amount of Contribution (\$)  \$31.55
<b>8</b> Principal occupation / Job title (See Instructions) Justice of the Peace		<b>9</b> Employer (See Instructions)
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walden, Melissa <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79761	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions)
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welling, Tonny <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79760	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 03/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welling, Tonny <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79760	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitefield, Kay (Mrs.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79765	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 70/71 Rpt: 73/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitefield, Kay (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79765	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Paula (Ms.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Paula (Ms.) <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$31.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wise, Jim (Mr.) <hr/> Contributor address; City; State; Zip Code  Midland, TX 79707	Amount of Contribution (\$)  \$60.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wise, Kathryn (Mrs.) <hr/> Contributor address; City; State; Zip Code  Midland, TX 79707	Amount of Contribution (\$)  \$128.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 71/71 Rpt: 74/92
<b>2</b> FILER NAME Ector County Republican Women's Club		<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wise, Kathryn (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Midland, TX 79707	<b>7</b> Amount of Contribution (\$)  \$128.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions)
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Matt <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Tracey <hr/> Contributor address; City; State; Zip Code  Odessa, TX 79762	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Caterer		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Kathleen (Mrs.) <hr/> Contributor address; City; State; Zip Code  Midland, TX 79707	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) self employed

# PLEDGED CONTRIBUTIONS

## SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:  
Sch: 1/1 Rpt: 75/92

2 FILER NAME

Ector County Republican Women's Club

3 Filer ID (Ethics Commission Filers)  
00016322

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

7 Pledgor Address; City; State; Zip Code

8 Amount of  
pledge (\$)

9 In-kind description  
(If applicable)

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

# LOANS

## SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:  
Sch: 1/1 Rpt: 76/92

2 FILER NAME  
Ector County Republican Women's Club

3 Filer ID (Ethics Commission Filers)  
00016322

4 TOTAL OF UNITEMIZED LOANS

\$ 0.00

5 Date of loan

7 Name of lender ☐ out-of-state PAC (ID#: \_\_\_\_\_)

9 Loan Amount (\$)

6 Is lender a  
financial  
institution?

8 Lender address; City; State; Zip Code

10 Interest Rate

11 Maturity Date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

☐ None

15 Check if personal funds were deposited into political account  
(See Instructions)

☐

16 GUARANTOR  
INFORMATION

☐ not applicable

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

20 Principal occupation

21 Employer (See Instructions)

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

**The Instruction Guide explains how to complete this form.**

<b>1</b> Total pages Schedule I: Sch: 1/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/17/2025	<b>5</b> Payee name A-1 Sign Engravers INC	
<b>6</b> Amount (\$) 400.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip P O Box 2641  Midland, TX 79702	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Printing Expense	<b>(b)</b> Description (See instructions regarding type of information required.) BADGES
Date 02/27/2025	Payee name A-1 Sign Engravers INC	
Amount (\$) 112.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip P O Box 2641  Midland, TX 79702	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Printing Expense	<b>(b)</b> Description (See instructions regarding type of information required.) BADGES
Date 04/16/2025	Payee name Amazon	
Amount (\$) 71.99 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 9804 S. 25th Ave  Seattle , WA 68123	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Printing Expense	<b>(b)</b> Description (See instructions regarding type of information required.) BADGES
Date 01/10/2025	Payee name Armic Systems	
Amount (\$) 129.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3405 Clearmont Ave  Odessa, TX 79762	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) ARMIC SYSTEMS

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

**The Instruction Guide explains how to complete this form.**

<b>1</b> Total pages Schedule I: Sch: 2/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/18/2025	<b>5</b> Payee name Armic Systems	
<b>6</b> Amount (\$) 129.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 3405 Clearmont Ave  Odessa, TX 79762	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) ARMIC SYSTEMS
Date 03/13/2025	Payee name Armic Systems	
Amount (\$) 129.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3405 Clearmont Ave  Odessa, TX 79762	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) ARMIC SYSTEMS
Date 04/22/2025	Payee name Armic Systems	
Amount (\$) 129.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3405 Clearmont Ave  Odessa, TX 79762	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) ARMIC SYSTEMS
Date 05/01/2025	Payee name Armic Systems	
Amount (\$) 129.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3405 Clearmont Ave  Odessa, TX 79762	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) ARMIC SYSTEMS

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 3/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 06/11/2025	<b>5</b> Payee name Armic Systems	
<b>6</b> Amount (\$) 129.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 3405 Clearmont Ave  Odessa, TX 79762	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) ARMIC SYSTEMS
Date 03/17/2025	Payee name Calloway, Judy (Mrs.)	
Amount (\$) 64.42 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1305 Bonham  odessa, TX 79761	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Event Expense	<b>(b)</b> Description (See instructions regarding type of information required.) ABC LEADERSHIP
Date 04/04/2025	Payee name Calloway, Judy (Mrs.)	
Amount (\$) 90.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1305 Bonham  odessa, TX 79761	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) TFRW
Date 04/04/2025	Payee name GRIMES, HEATHER (Mrs.)	
Amount (\$) 90.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 50 COBBLESTONE LN  ODESSA, TX 79765	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) TFRW

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 4/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/07/2025	<b>5</b> Payee name HARRISON, DANORA	
<b>6</b> Amount (\$) 53.34 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 16086 N PECAN AVE GARDENDALE, TX 79758	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) TFRW
Date 02/22/2025	Payee name HULL, ROBERT	
Amount (\$) 300.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3801 N DIXIE ODESSA, TX 79762	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Event Expense	<b>(b)</b> Description (See instructions regarding type of information required.) ABC LEADERSHIP SPEAKER COST
Date 04/07/2025	Payee name HURT, SHERRY	
Amount (\$) 90.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1117 SOUTH TRIP AVE. ODESSA, TX 79763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) TFRW
Date 05/22/2025	Payee name Hays, Debi (Mrs.)	
Amount (\$) 376.71 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 9205 Bedford Odessa, TX 79764	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) ABC LEADERSHIP

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 5/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/04/2025	<b>5</b> Payee name Hays, Debi (Mrs.)	
<b>6</b> Amount (\$) 90.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 9205 Bedford  Odessa, TX 79764	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) TFRW
Date 04/07/2025	Payee name Kelm, Donna (Mrs.)	
Amount (\$) 90.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 25 Kingsland Court  Odessa, TX 79762	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) TFRW
Date 01/30/2025	Payee name MCM Elegante	
Amount (\$) 2,125.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5200 E. University  Odessa, TX 79762	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) LUNCHES
Date 02/11/2025	Payee name MCM Elegante	
Amount (\$) 425.04 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5200 E. University  Odessa, TX 79762	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) LUNCHES

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 6/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/27/2025	<b>5</b> Payee name MCM Elegante	
<b>6</b> Amount (\$) 2,180.86 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 5200 E. University  Odessa, TX 79762	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b)</b> Description (See instructions regarding type of information required.) LUNCHES
Date 03/27/2025	Payee name MCM Elegante	
Amount (\$) 2,125.20 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5200 E. University  Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) LUNCHES
Date 04/22/2025	Payee name MCM Elegante	
Amount (\$) 1,669.80 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5200 E. University  Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) 59 MEMBERS - 2025 SUBMISSION #2	(b) Description (See instructions regarding type of information required.) 59 MEMBERS - 2025 SUBMISSION #2
Date 05/22/2025	Payee name MCM Elegante	
Amount (\$) 1,529.69 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5200 E. University  Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) LUNCHES

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 7/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/07/2025	<b>5</b> Payee name Minor, Rachel (Ms.)	
<b>6</b> Amount (\$) 90.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 8001 Brownstone  Odessa, TX 79765	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) TFRW
Date 03/10/2025	Payee name NFRW	
Amount (\$) 25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 124 N Alfred St  Alexandria, VA 22314	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) NFRW
Date 03/10/2025	Payee name NFRW	
Amount (\$) 25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 124 N Alfred St  Alexandria, VA 22314	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) NFRW
Date 03/10/2025	Payee name NFRW	
Amount (\$) 25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 124 N Alfred St  Alexandria, VA 22314	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) NFRW

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 8/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/10/2025	<b>5</b> Payee name NFRW	
<b>6</b> Amount (\$) 25.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 124 N Alfred St Alexandria, VA 22314	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) NFRW
Date 03/10/2025	Payee name NFRW	
Amount (\$) 25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 124 N Alfred St Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) NFRW
Date 03/10/2025	Payee name NFRW	
Amount (\$) 25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 124 N Alfred St Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) NFRW
Date 01/21/2025	Payee name Quickbooks/Intuit Inc	
Amount (\$) 69.29 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2700 Coast Ave Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) MONTHLY QB FEES

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

**The Instruction Guide explains how to complete this form.**

<b>1</b> Total pages Schedule I: Sch: 9/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 02/21/2025	<b>5</b> Payee name Quickbooks/Intuit Inc	
<b>6</b> Amount (\$) 69.29 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 2700 Coast Ave  Mountain View, CA 94043	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Accounting/Banking	<b>(b)</b> Description (See instructions regarding type of information required.) MONTHLY QB FEES
Date 03/21/2025	Payee name Quickbooks/Intuit Inc	
Amount (\$) 69.29 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2700 Coast Ave  Mountain View, CA 94043	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Accounting/Banking	<b>(b)</b> Description (See instructions regarding type of information required.) MONTHLY QB FEES
Date 04/21/2025	Payee name Quickbooks/Intuit Inc	
Amount (\$) 69.29 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2700 Coast Ave  Mountain View, CA 94043	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Accounting/Banking	<b>(b)</b> Description (See instructions regarding type of information required.) MONTHLY QB FEES
Date 05/21/2025	Payee name Quickbooks/Intuit Inc	
Amount (\$) 69.29 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2700 Coast Ave  Mountain View, CA 94043	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Accounting/Banking	<b>(b)</b> Description (See instructions regarding type of information required.) MONTHLY QB FEES

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 10/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 06/21/2025	<b>5</b> Payee name Quickbooks/Intuit Inc	
<b>6</b> Amount (\$) 69.29 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 2700 Coast Ave  Mountain View, CA 94043	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Accounting/Banking	<b>(b)</b> Description (See instructions regarding type of information required.) MONTHLY QB FEES
Date 04/07/2025	Payee name RHODES, BETSY	
Amount (\$) 90.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2018 BOISE DR  ODESSA, TX 79762	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) TFRW
Date 06/19/2025	Payee name Squareup.com	
Amount (\$) 196.07 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 14500 FAA Blvd Suite 100 Ft Worth, TX 76155	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) SQUARE
Date 02/22/2025	Payee name TATE, JILL	
Amount (\$) 300.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 US-183 J4,  Austin, TX 78750	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Event Expense	<b>(b)</b> Description (See instructions regarding type of information required.) ABC LEADERSHIP SPEAKER COST

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

**The Instruction Guide explains how to complete this form.**

<b>1</b> Total pages Schedule I: Sch: 11/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/08/2025	<b>5</b> Payee name TFRW	
<b>6</b> Amount (\$) 200.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 13740 US-183 J4,  Austin, TX 78750	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	<b>(b)</b> Description (See instructions regarding type of information required.) SCHOLARSHIPS
Date 01/08/2025	Payee name TFRW	
Amount (\$) 25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 US-183 J4,  Austin, TX 78750	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) HOSPITALITY	<b>(b)</b> Description (See instructions regarding type of information required.) HOSPITALITY
Date 01/08/2025	Payee name TFRW	
Amount (\$) 10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 US-183 J4,  Austin, TX 78750	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	<b>(b)</b> Description (See instructions regarding type of information required.) SCHOLARSHIPS LEADERSHIP
Date 01/09/2025	Payee name TFRW	
Amount (\$) 1,492.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 US-183 J4,  Austin, TX 78750	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) 2025 SUBMISSION #2	<b>(b)</b> Description (See instructions regarding type of information required.) 59 MEMBERS - 2025 SUBMISSION #2

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 12/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/31/2025	<b>5</b> Payee name TFRW	
<b>6</b> Amount (\$) 455.40 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 13740 US-183 J4,  Austin, TX 78750	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) 18 MEMBERS - 2025 SUBMISSION #3	<b>(b)</b> Description (See instructions regarding type of information required.) 18 MEMBERS - 2025 SUBMISSION #3
Date 02/28/2025	Payee name TFRW	
Amount (\$) 379.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 US-183 J4,  Austin, TX 78750	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) 15 MEMBERS - 2025 SUBMISSION #4	<b>(b)</b> Description (See instructions regarding type of information required.) 15 MEMBERS - 2025 SUBMISSION #4
Date 03/08/2025	Payee name TFRW	
Amount (\$) 94.06 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 US-183 J4,  Austin, TX 78750	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) 59 MEMBERS - 2025 SUBMISSION #2	<b>(b)</b> Description (See instructions regarding type of information required.) 59 MEMBERS - 2025 SUBMISSION #2
Date 03/26/2025	Payee name TFRW	
Amount (\$) 834.90 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 US-183 J4,  Austin, TX 78750	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) 59 MEMBERS - 2025 SUBMISSION #2	<b>(b)</b> Description (See instructions regarding type of information required.) 59 MEMBERS - 2025 SUBMISSION #2

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 13/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/22/2025	<b>5</b> Payee name TFRW	
<b>6</b> Amount (\$) 506.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 13740 US-183 J4,  Austin, TX 78750	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) 59 MEMBERS - 2025 SUBMISSION #2	<b>(b)</b> Description (See instructions regarding type of information required.) 59 MEMBERS - 2025 SUBMISSION #2
Date 04/24/2025	Payee name TFRW	
Amount (\$) 151.80 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 US-183 J4,  Austin, TX 78750	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) 59 MEMBERS - 2025 SUBMISSION #2	<b>(b)</b> Description (See instructions regarding type of information required.) 59 MEMBERS - 2025 SUBMISSION #2
Date 05/30/2025	Payee name TFRW	
Amount (\$) 175.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 US-183 J4,  Austin, TX 78750	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) 59 MEMBERS - 2025 SUBMISSION #2	<b>(b)</b> Description (See instructions regarding type of information required.) 59 MEMBERS - 2025 SUBMISSION #2
Date 06/02/2025	Payee name TFRW	
Amount (\$) 177.10 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 US-183 J4,  Austin, TX 78750	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) TFRW

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

**The Instruction Guide explains how to complete this form.**

<b>1</b> Total pages Schedule I: Sch: 14/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 01/01/2025	<b>5</b> Payee name Textedly App	
<b>6</b> Amount (\$) 8.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 349 Fifth Ave  New York, NY 10016	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Advertising Expense	<b>(b)</b> Description (See instructions regarding type of information required.) TEXTEDLY
Date 01/13/2025	Payee name Textedly App	
Amount (\$) 53.20 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 349 Fifth Ave  New York, NY 10016	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Advertising Expense	<b>(b)</b> Description (See instructions regarding type of information required.) TEXTEDLY
Date 02/01/2025	Payee name Textedly App	
Amount (\$) 8.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 349 Fifth Ave  New York, NY 10016	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Advertising Expense	<b>(b)</b> Description (See instructions regarding type of information required.) TEXTEDLY
Date 02/18/2025	Payee name Textedly App	
Amount (\$) 266.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 349 Fifth Ave  New York, NY 10016	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Advertising Expense	<b>(b)</b> Description (See instructions regarding type of information required.) TEXTEDLY

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 15/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 03/01/2025	<b>5</b> Payee name Textedly App	
<b>6</b> Amount (\$) 8.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 349 Fifth Ave  New York, NY 10016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Advertising Expense	<b>(b)</b> Description (See instructions regarding type of information required.) TEXTEDLY
Date 04/01/2025	Payee name Textedly App	
Amount (\$) 8.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 349 Fifth Ave  New York, NY 10016	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) TEXTEDLY
Date 05/01/2025	Payee name Textedly App	
Amount (\$) 8.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 349 Fifth Ave  New York, NY 10016	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) TEXTEDLY
Date 06/01/2025	Payee name Textedly App	
Amount (\$) 8.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 349 Fifth Ave  New York, NY 10016	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) TEXTEDLY

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

**The Instruction Guide explains how to complete this form.**

<b>1</b> Total pages Schedule I: Sch: 16/16 Rpt:	<b>2</b> FILER NAME Ector County Republican Women's Club	<b>3</b> Filer ID (Ethics Commission Filers) 00016322
<b>4</b> Date 04/07/2025	<b>5</b> Payee name WILLIAMS, PAULA	
<b>6</b> Amount (\$) 90.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 4412 GRAVES DR ODESSA, TX 79762	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) TFRW
Date 02/04/2025	Payee name WIX.COM	
Amount (\$) 51.63 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip P O Box 40190 San Francisco, CA 94104	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Advertising Expense	<b>(b)</b> Description (See instructions regarding type of information required.) WIX
Date 03/07/2025	Payee name WIX.COM	
Amount (\$) 449.45 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip P O Box 40190 San Francisco, CA 94104	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Advertising Expense	<b>(b)</b> Description (See instructions regarding type of information required.) WIX