FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00086477 3 COMMITTEE NAME **OFFICE USE ONLY** Blanco County Republican Women Date Received **ELECTRONICALLY FILED** 07/05/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 190 Date Hand-delivered or Date Postmarked Johnson City, TX 78636 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Linda G. NAME NICKNAME LAST **SUFFIX** Burnham STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 3486 Old Marble Falls Rd STREET **ADDRESS** (Residence or Business) Round Mountain, TX 78663 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 190 MAILING **ADDRESS** Johnson City, TX 78636 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 731-7484 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2025 06/30/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Blanco County Repul	olican Women	00086477		
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M X check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	1,380.00
	2. TOTAL POLITICA (OTHER THAN PLE	IL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,380.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	494.50
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	3,853.05
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<u>'</u>	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Mrs. Linda	G. Burnham	
		Signature of Car	npaign Treasui	rer
AFFIX NOTA	RY STAMP / SEAL ABOVE			
		, th	nis 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 offic	er administering oath
		-		-

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

				3 of 7			
17 COMMITTI	EE NAME	18 Filer ID	(Ethics Comm	ission Filers)			
Blanco Co							
19 SCHEDUL NAME OF	SUBTOTAL AMOUNT						
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 1,380				
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00			
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00			
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$				
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$				
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$				
7.	7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION						
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$				
9. X	SCHEDULE E: LOANS		\$	0.00			
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	494.50			
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00			
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	0.00			
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00			
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$				
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$				
			•				

PLE	DGED CONTRIBU	TIONS			SCHEDULE	: B	
Т	he Instruction Guide exp	olains how to comp	elete this form.	1	Total pages Schedule B: Sch: 1/1 Rpt: 4/7		
2 FILER N				3	Filer ID (Ethics Commission Filers)		
<u></u>	County Republican Women	250		+	00086477	0.00	
	OF UNITEMIZED PLEDO				\$		
5 Date	6 Full name of pledgor	out-of-state PAC (II	D#:	_) 8	Amount of pledge (\$) 9 In-kind description (If applicable)	d description pplicable)	
	7 Pledgor Address;	City; State; Zip Co	de				
]	Check if travel outside of Texas. Complete Sc	chedule T	
10 Principal	occupation / Job title (See Instru	ctions)	11 Employer (See In	structi	ons)		

L	LOANS					SCHEDUL	ΕE					
T	he Instruction	on Guide explains how	orm.	1 Total pages Schedule E: Sch: 1/1 Rpt: 5/7								
l	ILER NAME Blanco County F	Republican Women										
4 T	OTAL OF UN	IITEMIZED LOANS			•	\$	0.00					
5 D	Pate of loan	7 Name of lender	out-of-state PA	C (ID#:)	9 Loan Amount (\$)						
fi	s lender a nancial nstitution?	8 Lender address; Ci	ity; State;	Zip Code		10 Interest Rate						
						11 Maturity Date						
12 P	rincipal occupation	on / Job title (See Instructions)		13 Employer (See Instructions	5)							
14 D	Description of Coll	ateral		15 Check if personal funds we	9 Loan Amount (\$) 10 Interest Rate 11 Maturity Date Indications) Index were deposited into political account (See Instructions) 19 Amount Guaranteed (\$)							
	GUARANTOR NFORMATION	17 Name of guarantor				19 Amount Guarantee	ed (\$)					
	not applicable	18 Guarantor address; Ci	ity; State;	Zip Code								
20 P	rincipal occupation	on		21 Employer (See Instructions	6)	1						

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

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

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/2 Rpt: 6/7	Blanco County Republican Women	00086477
4 Date	5 Payee name	'
03/27/2025	Fry, Pat	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$100.00	9777 RR 962 E	
Expenditure from corporate funds	Cypress Mill, TX 78663	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
		National Motto Project
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou H	ght Office held
<u> </u>		
Date	Payee name	
03/12/2025	Johnson City Bank	
Amount (\$)	Payee address; City; State; Zip Co	de
\$15.00	PO Box 426	
Funanditura from		
Expenditure from corporate funds	Johnson City, TX 78636	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
LAFENDITORE		Check if Austin, TX, officeholder living expense
		Stop Payment Fee
One and the ONII Wife diagram	Constitute (Office helden name	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou H	ght Office held
Date	Payee name	
03/13/2025	TFRW	
Amount (\$)	Payee address; City; State; Zip Co	de
\$354.20	PO Box 171146	
Expenditure from		
corporate funds	Austin, TX 78717-0041	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
LXI LIBITORE		Check if Austin, TX, officeholder living expense
		Membership Dues
Complete CNU V if all	Condidate/Officeholder name	other bald
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou H	ght Office held
,		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Co	nmittee	Legal Se	ds/Memorials Exp rvices struction Guide			pense ages/Contra			Travel Out of Dis OTHER (enter a		ted above)
1	Total pages Schedule F1:	2	FILER NAME						[;	3 F	iler ID	(Ethics Con	nmission Filers)
	Sch: 2/2 Rpt: 7/7				publican Wo	men					00086477		·
4	Date	5	Payee name										
L	05/07/2025		TFRW										
6	Amount (\$)	7	Payee addre	ess;	City;	State;	Zip Co	de					
	\$25.30		PO Box 17	1146									
╟	Expenditure from		Austin, TX	70717_	0041								
8	URPOSE	(a)						(b) Desc	crintion				
ľ	OF	(")	Fees	ee Catego	ries listed at the to	p of this sche	edule)			outside	e of Texas. Com	plete Schedule	Т.
	EXPENDITURE		1 005					□°	heck if Austin,	TX, o	fficeholder living	expense	
								Mer	nbership D	Due	S		
l													
9	Complete ONLY if direct expenditure to benefit C/OI	H	Candidate/Off	iceholde	er name	C	Office sou	ght			Office he	eld	