#### 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) 00084922 3 COMMITTEE NAME **OFFICE USE ONLY Great State Republicans** Date Received **ELECTRONICALLY FILED** 07/12/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 764 Date Hand-delivered or Date Postmarked Change of Address Hallettsville, TX 77964 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mona NAME NICKNAME LAST **SUFFIX** Davenport STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 106 Hillside Terrace STREET **ADDRESS** (Residence or Business) Hallettsville, TX 77964 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 106 Hillside Terrace MAILING **ADDRESS** Hallettsville, TX 77964 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (361) 798-0731 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

			<u> </u>	
2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Great State Republic	ans		00084922	
4 COMMITTEE ACTIVITY	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2	A Supported		
	Measures     (Describe by date and location)	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	2 Officeholders			
	Officeholders     Assisted  (Identify by name or, if applicable, classify by party.)			
	1	<u> </u>		
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)  qualifies for the higher itemization threshold	\$	0.00
		AL CONTRIBUTIONS		
	(OTHER THAN PLE	EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,440.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	733.55
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST IG PERIOD	F DAY \$	13,743.23
OUTSTANDING LOAN TOTALS	•	AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
6 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of p true and correct and includes all info under Title 15, Election Code.		
			Davenport	
		Signature of Ca	ampaign Treasi	urer
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ed before me, by the said _	,	this the	day
		which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of offi	cer administering oath

## **SUBTOTALS - GPAC**

## FORM **GPAC**COVER SHEET PG 3

				3 of 19
17 COMMITTI Great Sta	EE NAME te Republicans	<b>18</b> Filer ID 00084922	(Ethics Commissio	n Filers)
	E SUBTOTALS SCHEDULE		SUBTOTAL A	
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,440.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	)R	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$	
9.	SCHEDULE E: LOANS		\$	
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	733.55
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
I				

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDULI	E <b>A1</b>
	The Instruc	tion Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 1/10 Rpt: 4/19	
2	FILER NAME Great State F	Republicans		3	Filer ID (Ethics Commission 00084922	n Filers)
4	Date 02/25/2025	<ul> <li>Full name of contributor  out-of-state PAC (II Anderson, Nancy</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$50.00
_		Moulton, TX 77975		<u> </u>		
8	Principal occur Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 01/29/2025	Full name of contributor out-of-state PAC (If Bright, Kevin  Contributor address; City; State; Zip Code  Hallettsville, TX 77964	D#:)		Amount of Contribution (\$)	\$15.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Security Office	eer				
	Date 02/25/2025	Full name of contributor	D#:)		Amount of Contribution (\$)	\$65.00
		Sheridan, TX 77475				
	Principal occu Insurance Aç	oation / Job title (See Instructions) ent	Employer (See Instructions	s)		
	Date 02/25/2025	Full name of contributor out-of-state PAC (II Brunner, Verna Contributor address; City; State; Zip Code Hallettsville, TX 77964	D#:)		Amount of Contribution (\$)	\$65.00
	Principal occu Self Employe	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 02/25/2025	Full name of contributor out-of-state PAC (II Cavarretta, Blanche Contributor address; City; State; Zip Code Hallettsville, TX 77964	D#:)		Amount of Contribution (\$)	\$65.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBI	JTIONS			SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete	this form.		1	Total pages Schedule A1: Sch: 2/10 Rpt: 5/19	
2	FILER NAME Great State I	Republicans			3	Filer ID (Ethics Commission 00084922	n Filers)
4	Date 01/29/2025	<ul> <li>Full name of contributor  out-of-state PA Chovanetz, Melissa</li> <li>Contributor address; City; State; Zip Code</li> </ul>			7	Amount of Contribution (\$)	\$50.00
_	<u> </u>	Hallettsville, TX 77964	<u> </u>	(2)			
8	Principal occu Secretary	pation / Job title (See Instructions)	9 Empl	oyer (See Instructions)	)		
	Date 04/01/2025	Full name of contributor out-of-state PA Chovanetz, Rida Contributor address; City; State; Zip Code	C (ID#:			Amount of Contribution (\$)	\$100.00
	Dringing age	Hallettsville, TX 77964	Fmal	aver (Cae Instructions)			
	Retired	pation / Job title (See Instructions)	Епірі	oyer (See Instructions)	)		
	Date 02/26/2025	Full name of contributor out-of-state PA Coomer, Debra Contributor address; City; State; Zip Code	C (ID#:	)		Amount of Contribution (\$)	\$50.00
		Hallettsville, TX 77964					
	Principal occu Retired	pation / Job title (See Instructions)	Empl	oyer (See Instructions)	)		
	Date 01/29/2025	Full name of contributor out-of-state PA  Cromey, Nicole  Contributor address; City; State; Zip Code  Moulton, TX 77975	C (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Teacher	pation / Job title (See Instructions)	Empl	oyer (See Instructions)	)		
	Date 04/01/2025	Full name of contributor out-of-state PA  Davenport, Mona  Contributor address; City; State; Zip Code  Hallettsville, TX 77964		)		Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)	Empl	oyer (See Instructions)	)		
			<b>'</b>				

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 3/10 Rpt: 6/19	
2	FILER NAME Great State F	Republicans		3	Filer ID (Ethics Commission 00084922	ı Filers)
4		<ul> <li>Full name of contributor  out-of-state PAC (ID Davenport, Mona</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$50.00
_		Hallettsville, TX 77964	10.5 1 (0.1 1 11	Ĺ		
8	Principal occur Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 05/07/2025	Full name of contributor out-of-state PAC (ID Davenport, Mona  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$35.00
	Deinainal assu	Hallettsville, TX 77964	Franksian (Cookastii an	<u></u>		
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/17/2025	Full name of contributor out-of-state PAC (ID Davenport, Mona  Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$60.00
		Hallettsville, TX 77964				
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 02/25/2025	Full name of contributor out-of-state PAC (ID Dobbs, Dolores  Contributor address; City; State; Zip Code  Hallettsville, TX 77964	) #:)		Amount of Contribution (\$)	\$65.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 01/29/2025	Full name of contributor out-of-state PAC (IDD Draper, Cheryl  Contributor address; City; State; Zip Code  Hallettsville, TX 77964	)		Amount of Contribution (\$)	\$65.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			1			

	MONEI	ARY POLITICAL CONTRIBUTION	DNS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 4/10 Rpt: 7/19	
2	FILER NAME	2		3	Filer ID (Ethics Commission	r Filers)
_	Great State			L	00084922	
4	Date 02/25/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$15.00
•	Dringing Local	Hallettsville, TX 77964	Employer (See Instructions			
0	JP	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 02/19/2025	Full name of contributor out-of-state PAC (ID#:_Foyt, Monica  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$65.00
		Hallettsville, TX 77964				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/03/2025	Full name of contributor out-of-state PAC (ID#:_Foyt, Pamala Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$65.00
		Hallettsville, TX 77964				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/16/2025	Full name of contributor out-of-state PAC (ID#:_Geesaan, Dennis  Contributor address; City; State; Zip Code  Flatonia, TX 78941			Amount of Contribution (\$)	\$40.00
	Principal occu Commission	pation / Job title (See Instructions) er	Employer (See Instructions	5)		
	Date 05/14/2025	Full name of contributor out-of-state PAC (ID#:_Herman, Georgia  Contributor address; City; State; Zip Code  Hallettsville, TX 77964			Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CO	NTRIBUTION	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to	complete this for	m.	1	Total pages Schedule A1: Sch: 5/10 Rpt: 8/19	
2	FILER NAME Great State F	Republicans			3	Filer ID (Ethics Commission 00084922	n Filers)
4	Date 02/25/2025	<ul><li>Full name of contributor Hill, Travis</li><li>Contributor address; City; State;</li></ul>			7	Amount of Contribution (\$)	\$15.00
8	Principal occur	Moulton, TX 77975 pation / Job title (See Instructions)	9	Employer (See Instructions	:) 		
Ŭ	Attorney	sation 7 oob title (occ motitudions)		Employer (See Instructions	',		
	Date 01/03/2025	Hlavac, Harvey  Contributor address; City; State;		)		Amount of Contribution (\$)	\$100.00
	Principal occu	Hallettsville, TX 77964 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Retired						
	Date 02/25/2025	Full name of contributor  Hlavac, Kimberly  Contributor address; City; State;	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$65.00
		Hallettsville, TX 77964					
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 05/05/2025	Full name of contributor  Jordan, Rita  Contributor address; City; State;  Karnes City, TX 78118	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$40.00
	Principal occu Clerk	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 01/29/2025	Kanak, Lorena	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$65.00
	Principal occu Republican (	oation / Job title (See Instructions) Chair		Employer (See Instructions	5)		
			'				

	MONET	ARY POLITICAL CONTRIB	BUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complet	e this fo	rm.	1	Total pages Schedule A1: Sch: 6/10 Rpt: 9/19	
2	FILER NAME Great State I	Republicans			3	Filer ID (Ethics Commission 00084922	n Filers)
4	Date 05/20/2025	<ul> <li>Full name of contributor  out-of-state F Kanak, Lorena</li> <li>Contributor address; City; State; Zip Code</li> </ul>	,	)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Hallettsville, TX 77964 pation / Job title (See Instructions)	9	Employer (See Instructions	<u>;)</u>		
Ū	County Chai			Employer (dee mandellone	,		
	Date 02/25/2025	Full name of contributor out-of-state F Kirk, Ginger  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$50.00
	Dringing! aggs	Hallettsville, TX 77964		Employer (Coo Instructions	<u></u>		
	Retired	pation / Job title (See Instructions)		Employer (See Instructions	>)		
	Date 02/25/2025	Full name of contributor out-of-state F Koehn, Barbara Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$50.00
		Hallettsville, TX 77964					
	Principal occu Retired	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 02/25/2025	Full name of contributor out-of-state F Kouba, Elizabeth Contributor address; City; State; Zip Code Hallettsville, TX 77964				Amount of Contribution (\$)	\$50.00
	Principal occu Retired	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 05/07/2025	Full name of contributor out-of-state F Lundy, Robert  Contributor address; City; State; Zip Code  Hallettsville, TX 77964		)	•	Amount of Contribution (\$)	\$115.00
	Principal occu Financial Pla	oation / Job title (See Instructions) nner		Employer (See Instructions	5)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/10 Rpt: 10/19	
2	FILER NAME Great State I	Republicans			3	Filer ID (Ethics Commission 00084922	Filers)
4	Date 02/25/2025	<ul><li>5 Full name of contributor Montgomery, Nella</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:_ tte; Zip Code		7	Amount of Contribution (\$)	\$50.00
8	Principal occu Retired	Hallettsville, TX 77964 pation / Job title (See Instructions)		9 Employer (See Instructions	<u> </u> ;)		
	Date 06/23/2025	Full name of contributor  Muehr, Janis  Contributor address; City; Sta  Hallettsville, TX 77964	out-of-state PAC (ID#:_ ute; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 02/25/2025	Full name of contributor Mullen, Sandra Contributor address; City; Sta	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$50.00
	Principal occu Self Employe	Yoakum, TX 77995 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 02/25/2025	Full name of contributor Nordquist, Laurie  Contributor address; City; Sta  Hallettsville, TX 77964	out-of-state PAC (ID#:_ tte; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu Sales	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Date 01/28/2025	Full name of contributor Old, William Contributor address; City; Sta	out-of-state PAC (ID#:_ tte; Zip Code			Amount of Contribution (\$)	\$15.00
	Principal occu District Judge	pation / Job title (See Instructions) e		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 8/10 Rpt: 11/19	
2	FILER NAME Great State I	Republicans		3	Filer ID (Ethics Commission 00084922	ı Filers)
4		<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$50.00
_		Hallettsville, TX 77964	1	_		
8	Principal occu Clerk	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 02/25/2025	Full name of contributor out-of-state PAC (ID#:_Peck, Aileen  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$65.00
	Dringinal occu	Hallettsville, TX 77964 pation / Job title (See Instructions)	Employer (See Instructions	·/-		
	Retired	Janott 7 Job tille (See Instructions)	Employer (See instructions	)		
	Date 04/01/2025	Full name of contributor out-of-state PAC (ID#:_Peck, Aileen  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
		Hallettsville, TX 77964				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 01/07/2025	Full name of contributor out-of-state PAC (ID#:_Renger, Harvey  Contributor address; City; State; Zip Code  Hallettsville, TX 77964			Amount of Contribution (\$)	\$15.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 04/01/2025	Full name of contributor out-of-state PAC (ID#:_Renger, Karen  Contributor address; City; State; Zip Code  Hallettsville, TX 77964			Amount of Contribution (\$)	\$35.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			'			

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 9/10 Rpt: 12/19	
2	FILER NAME Great State I	Republicans		3	Filer ID (Ethics Commission 00084922	Filers)
4	Date 04/09/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$15.00
_		Hallettsville, TX 77964				
8	Principal occu Minister	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/17/2025	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
	Principal occu	Shiner, TX 77984  pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Bank Officer	,	. , ,	,		
	Date 02/25/2025	Full name of contributor out-of-state PAC (ID#: Skelton, Norma  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$65.00
		Hallettsville, TX 77964				
	Principal occu Stylist	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 04/01/2025	Full name of contributor out-of-state PAC (ID#:Smith, Linda  Contributor address; City; State; Zip Code  Hallettsville, TX 77964			Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 04/01/2025	Full name of contributor out-of-state PAC (ID#:Smith, Linda  Contributor address; City; State; Zip Code  Hallettsville, TX 77964			Amount of Contribution (\$)	\$60.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		
		•				

The Instruction Guide explains how to complete this form.  1. Total pages Schedule A1: Sch: 10/10 Rpt: 13/19 2. FILER NAME Great State Republicans  4. Date 02/25/2025 Sleffetk, Barbara 6. Contributor address: City: State: Zip Code Hallettsville, T.X. 77984 8. Principal occupation / Job title (See Instructions) County Clerk  Date 02/25/2025 Full mane of contributor address: City: State: Zip Code Wenske, Lori Contributor address: City: State: Zip Code 92/25/2025 Shiner, T.X. 77984 Frincipal occupation / Job title (See Instructions) District Clerk  Employer (See Instructions) Employer (See Instructions)  Employer (See Instructions) Employer (See Instructions)		MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
Great State Republicans  4 Date 02/25/2025		The Instruction Guide explains how to complete this form.	
A Date 02/25/2025   5 Full name of contributor	2		
Principal occupation / Job title (See Instructions)  County Clerk  Date  O2/25/2025  Wenske, Lori  Contributor address; City; State; Zip Code  Shiner, TX 77984  Principal occupation / Job title (See Instructions)  Pmployer (See Instructions)  Amount of Contribution (\$)  \$50.00  Employer (See Instructions)	4	Date 5 Full name of contributor out-of-state PAC (ID#:) 02/25/2025 Steffek, Barbara	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)  02/25/2025 Wenske, Lori \$50.00  Contributor address; City; State; Zip Code  Shiner, TX 77984  Principal occupation / Job title (See Instructions) Employer (See Instructions)			
02/25/2025 Wenske, Lori \$50.00  Contributor address; City; State; Zip Code  Shiner, TX 77984  Principal occupation / Job title (See Instructions) Employer (See Instructions)	8		ions)
Principal occupation / Job title (See Instructions)  Employer (See Instructions)		02/25/2025 Wenske, Lori	
		Shiner, TX 77984	
			ions)

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	<u> </u>						
Sch: 1/6 Rpt: 14/19	Great State Republicans 00084922						
4 Date	5 Payee name						
05/24/2025	Amazon						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$88.37	410 Terry Ave. N						
	TIO TOTY / WO. IV						
Expenditure from	Soottle MA 00100						
corporate funds	Seattle, WA 98109						
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
EXPENDITURE	Office Overhead/Rental Expense						
	Check if Austin, TX, officeholder living expense						
	Office Supplies						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
experiorare to benefit C/OI	<u> </u>						
Date	Payee name						
02/04/2025	Greater Houston Council of Women						
Amount (\$)	Payee address; City; State; Zip Code						
` '							
\$30.00	7941 Katy Freeway #272						
Expenditure from							
corporate funds	Houston, TX 77024						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF	Office Overhead/Rental Expense						
EXPENDITURE	Check if Austin, TX, officeholder living expense						
	Dues						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/O	<del>1</del>						
Date	Daysa nama						
Date	Payee name						
02/24/2025	HEB						
Amount (\$)	Payee address; City; State; Zip Code						
\$34.89	6106 N. Navarro						
Expenditure from corporate funds	Victoria, TX 77904						
PURPOSE							
OF	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.						
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense						
	Refreshments						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/Ol							
·							

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
Sch: 2/6 Rpt: 15/19	Great State Republicans 00084922						
4 Date	5 Payee name						
01/13/2025	Hallettsville Chamber of Commerce						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$75.00	1614 N. Texana						
- Evpanditura from							
Expenditure from corporate funds	Hallettsville, TX 77964						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense						
	Dues						
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OI							
Date	Payee name						
02/06/2025	Lavaca Co.Office Supply						
Amount (\$)	Payee address; City; State; Zip Code						
\$15.00	107 N. Main						
φ15.00	107 IN. IVIAIII						
Expenditure from corporate funds	Hallettsville, TX 77964						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF  Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.							
	Check if Austin, TX, officeholder living expense Office Supplies						
	Cinice Supplies						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OI							
Date	Davisa nama						
06/06/2025	Payee name Lavaca Co.Office Supply						
Amount (\$)	Payee address; City; State; Zip Code 107 N. Main						
\$11.11	107 N. Maiii						
Expenditure from corporate funds	Hallettsville, TX 77964						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.						
	Check if Austin, TX, officeholder living expense						
	Office Supplies						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OH						

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
Sch: 3/6 Rpt: 16/19	Great State Republicans 00084922						
4 Date	5 Payee name						
03/11/2025	Lone Star Badge						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$32.04	301 Quail Run Rd.						
Expenditure from corporate funds	Martindale, TX 78655						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense						
	Membership Badges						
	Weinbership Budges						
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OI							
Date	Payee name						
05/19/2025	Lone Star Badge						
Amount (\$)	Payee address; City; State; Zip Code						
\$23.85	301 Quail Run Rd.						
Expenditure from corporate funds	Martindale, TX 78655						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Office Overhead/Rental Expense						
EXI ENDITORE	Check if Austin, TX, officeholder living expense						
	Membership Badges						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
04/28/2025	Los Cabos						
Amount (\$)	Payee address; City; State; Zip Code						
\$30.15	1636 N. Texana						
Expenditure from corporate funds	Hallettsville, TX 77964						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.						
EXI ENDITORE	Check if Austin, TX, officeholder living expense						
	Speaker Meals						
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							
,							

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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 complete this form.					
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 4/6 Rpt: 17/19	Great State Republicans		00084922			
4 Date	5 Payee name		· ·			
02/24/2025	Sam's Club					
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode				
\$103.86	9202 N. Navarro					
Expenditure from corporate funds	Victoria, TX 77904					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	<b>(b)</b> De	escription			
OF	Event Expense		Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE	·		Check if Austin, TX, officeholder living expense			
		R	efreshments			
		<u> </u>				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught	Office held			
'						
Date	Payee name					
02/06/2025	TFRW					
Amount (\$)	Payee address; City; State; Zip Co	ode				
\$100.00	P.O. Box 171146					
Expenditure from						
corporate funds	Austin, TX 78717					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription			
OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
			ues			
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ught	Office held			
expenditure to benefit C/O		J				
Date	Payee name					
06/18/2025	TERW					
Amount (\$)	Payee address; City; State; Zip Ci	ode				
\$25.00	P.O. Box 171146					
\$23.00	1.27.232.22.3					
Expenditure from corporate funds	Austin, TX 78717					
PURPOSE		/h\ D				
OF	(a) Category (See Categories listed at the top of this schedule)  Fees	(0)	escription 7 Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE	1 663		Check if Austin, TX, officeholder living expense			
		Di	ues			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught	Office held			
experialitie to beliefit G/OFI						

#### 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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
Sch: 5/6 Rpt: 18/19	Great State Republicans 00084922				
4 Date	5 Payee name				
01/19/2025	U. S. Postal Service				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$16.06	206 S. LaGrange				
- "					
Expenditure from corporate funds	Hallettsville, TX 77964				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Office Overhead/Rental Expense				
	Check if Austin, TX, officeholder living expense				
	Office Supplies				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
experientare to benefit ever					
Date	Payee name				
01/08/2025	WalMart				
Amount (\$)	Payee address; City; State; Zip Code				
\$20.36	1506 N. Texana				
Expenditure from corporate funds	Hallettsville, TX 77964				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.				
	Check if Austin, TX, officeholder living expense Office Supplies				
	Office Supplies				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI					
Date	Payee name				
02/05/2025	WalMart				
Amount (\$)	Payee address; City; State; Zip Code				
\$63.93	1506 N. Texana				
Funon diture from					
Expenditure from corporate funds	Hallettsville, TX 77964				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Office Overhead/Rental Expense				
EXPENDITURE	Check if Austin, TX, officeholder living expense				
	Office Supplies				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OH					

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributing Donations Made By Candidate/Officeholder/Politica Credit Card Payment	- I Committee	Gift/Awards/Memorials Exper Legal Services  The Instruction Guide (	Salaries/\	Expense Wages/Contract Labor	Travel Out of District OTHER (enter a category no	ot listed above)
1	Total pages Schedule F1:	2 FILER NAME				3 Filer ID (Ethics 0	Commission Filers)
	Sch: 6/6 Rpt: 19/19		Republicans			00084922	
4	Date	5 Payee name					
	02/18/2025	WalMart					
6	Amount (\$)	7 Payee addres	ss; City;	State; Zip Co	ode		
	\$63.93	1506 N. Tex	ana				
	Expenditure from corporate funds	Hallettsville,	TX 77964				
8	PURPOSE	(a) Category (Se	e Categories listed at the top	of this schedule)	(b) Description		
	OF EXPENDITURE	Office Overh	nead/Rental Expens	se	. —	I outside of Texas. Complete Sched	lule T.
					. —	n, TX, officeholder living expense	
					Office Suppl	162	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	ceholder name	Office sou	ught	Office held	