

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b> (Ethics Commission Filers) 00055358	<b>2 Total pages filed:</b> 43
<b>3 COMMITTEE NAME</b> Republican Women of Yoakum Area		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 07/14/2025	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
<b>4 COMMITTEE ADDRESS</b>  <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO BOX 615  Yoakum, TX 77995	
<b>5 CAMPAIGN TREASURER NAME</b>		MS / MRS / MR FIRST MI Cynthia Marie <hr/> NICKNAME LAST SUFFIX Day	
<b>6 CAMPAIGN TREASURER STREET ADDRESS</b> <small>(Residence or Business)</small>		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 497 CR 312  Shiner, TX 77984	
<b>7 CAMPAIGN TREASURER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 497 CR 312  Shiner, TX 77984	
<b>8 CAMPAIGN TREASURER PHONE</b>		AREA CODE PHONE NUMBER EXTENSION (361) 772-8306	
<b>9 REPORT TYPE</b>		<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 <input type="checkbox"/> Runoff	
<b>10 PERIOD COVERED</b>		Month Day Year      Month Day Year 01/01/2025      THROUGH      06/30/2025	
<b>11 ELECTION</b>		ELECTION DATE      ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 11/04/2025 <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

**GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Republican Women of Yoakum Area	<b>13 Filer ID</b> (Ethics Commission Filers) 00055358
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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	\$ 1,913.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 8,253.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 5,528.09
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 14,501.12
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.

Cynthia Marie Day  
\_\_\_\_\_  
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

<b>17 COMMITTEE NAME</b> Republican Women of Yoakum Area		<b>18 Filer ID</b> (Ethics Commission Filers) 00055358
<b>19 SCHEDULE SUBTOTALS</b>		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 8,253.00
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	\$ 5,528.09
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	\$ 360.00
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: 1/28 Rpt: 4/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 01/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ahrens, Leslie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Cuero, TX 77954	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) N/A
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ahrens, Leslie <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77954	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ahrens, Leslie <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77954	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ahrens, Leslie <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77954	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ahrens, Leslie <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77954	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/28 Rpt: 5/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 06/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ahrens, Leslie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Cuero, TX 77954	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) N/A
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Appelt, Helen (Mrs.) <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Appelt, Helen (Mrs.) <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bates, Cheryl (Mrs.) <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Factory Rep.		Employer (See Instructions) KAS Corp
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Becker, Cathy <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/28 Rpt: 6/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 05/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Berger-Spaulding, Mary Lee <hr/> <b>6</b> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) n/a
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cash, Brenda (Ms.) <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cash, Brenda (Ms.) <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cash, Brenda (Ms.) <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cash, Brenda (Ms.) <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/28 Rpt: 7/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 06/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cash, Brenda (Ms.)	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  Shiner, TX 77984	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) N/A
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chandler, Sandra (Mrs.)	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code  Sweet Home, TX 77987	
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#: _____ ) Chandler, Sandra (Mrs.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Sweet Home, TX 77987	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chandler, Sandra (Mrs.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Sweet Home, TX 77987	
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#: _____ ) Chandler, Sandra (Mrs.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Sweet Home, TX 77987	
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: 5/28 Rpt: 8/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 01/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cherry, Christina <hr/> <b>6</b> Contributor address; City; State; Zip Code  yoakum, TX 77995	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) home caregiver		<b>9</b> Employer (See Instructions) n/a
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cherry, Christina <hr/> Contributor address; City; State; Zip Code  yoakum, TX 77995	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) home caregiver		Employer (See Instructions) n/a
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cochran, Lucille <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77954	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Condie, Andrew <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77954	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) County Attorney		Employer (See Instructions) DeWitt County
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Condie, Andrew/Selena <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77954	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) County Attorney		Employer (See Instructions) DeWitt 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: 6/28 Rpt: 9/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 01/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Day, Marie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Shiner, TX 77984	<b>7</b> Amount of Contribution (\$)  \$55.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) n/a
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Day, Marie <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Day, Marie <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Day, Marie <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Day, Marie <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$800.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/28 Rpt: 10/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 05/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Day, Marie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Shiner, TX 77984	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) n/a
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Day, Marie <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Day, Marie <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Draper, John (Mr.) <hr/> Contributor address; City; State; Zip Code  Sheridan, TX 77475	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edwards, Virginia <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/28 Rpt: 11/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 02/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Foster, James <hr/> <b>6</b> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) JP1		<b>9</b> Employer (See Instructions) Lavaca County
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Foster, James <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) JP1		Employer (See Instructions) Lavaca County
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Foyt, Tom (Mr.) <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77965	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Foyt, Tom (Mr.) <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77965	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gonzalez, Pedro <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77594	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Unknown

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 9/28 Rpt: 12/43
2 FILER NAME Republican Women of Yoakum Area		3 Filer ID (Ethics Commission Filers) 00055358
4 Date 01/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hahn, Irene (Ms.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code  Victoria, TX 77903	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hall, Hallie (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Yoakum, TX 77995	
Principal occupation / Job title (See Instructions) Justice of the Peace Pct 4		Employer (See Instructions) Lavaca County
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hall, Hallie (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Yoakum, TX 77995	
Principal occupation / Job title (See Instructions) Justice of the Peace Pct 4		Employer (See Instructions) Lavaca County
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Heinsohn-Kropp, Holly	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Shiner, TX 77984	
Principal occupation / Job title (See Instructions) college prof		Employer (See Instructions) n/a
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Heinsohn-Kropp, Holly	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Shiner, TX 77984	
Principal occupation / Job title (See Instructions) college prof		Employer (See Instructions) n/a

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/28 Rpt: 13/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 04/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Heinsohn-Kropp, Holly	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  Shiner, TX 77984		
<b>8</b> Principal occupation / Job title (See Instructions) college prof		<b>9</b> Employer (See Instructions) n/a
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Heinsohn-Kropp, Holly	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Shiner, TX 77984		
Principal occupation / Job title (See Instructions) college prof		Employer (See Instructions) n/a
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Herchek, Mark	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Cuero, TX 77954		
Principal occupation / Job title (See Instructions) foreman		Employer (See Instructions) Dewitt County
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Herchek, Tammy	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  Cuero, TX 77954		
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions) Alamo Lumber
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Herchek, Tammy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Cuero, TX 77954		
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions) Alamo Lumber

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/28 Rpt: 14/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 05/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hosek, Nancy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Yoakum, TX 77995	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) unknown		<b>9</b> Employer (See Instructions) unknown
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) James, Cindy (Ms.) <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77954	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) James, Cindy (Ms.) <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77954	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) James, David (Mr.) <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77954	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) James Teleco
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Dana <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Admin. Asst.		Employer (See Instructions) DeWitt 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: 12/28 Rpt: 15/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 02/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kanak, Lorena (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) R.N.		<b>9</b> Employer (See Instructions) Lavaca Cnty Med. Cntr.
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kubecka, Kimberly <hr/> Contributor address; City; State; Zip Code  Victoria, TX 77901	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kuester, Geraldine (Ms.) <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kuester, Roy (Mr.) <hr/> Contributor address; City; State; Zip Code  Victoria, TX 77903	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leiningner, Kathleen <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$35.00
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: 13/28 Rpt: 16/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 06/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leining, Kathleen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Shiner, TX 77984	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions)
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Louderback, A. J. <hr/> Contributor address; City; State; Zip Code  Edna, TX 77957-3259	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) State Rep		Employer (See Instructions) TX Rep District 30
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marcak, Betty J <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McNerney, Jackie (Mrs.) <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McNerney, Jackie (Mrs.) <hr/> Contributor address; City; State; Zip Code  Shiner, TX 77984	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/28 Rpt: 17/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 05/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McNerney, Jackie (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Shiner, TX 77984	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) N/A
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mertz, Mary Ann (Ms.) <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mertz, Mary Ann (Ms.) <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morgenroth, Robert (Mr.) <hr/> Contributor address; City; State; Zip Code  Victoria, TX 77902	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Myers, Fonda <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	Amount of Contribution (\$)  \$45.00
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: 15/28 Rpt: 18/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 03/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Myers, Fonda <hr/> <b>6</b> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	<b>7</b> Amount of Contribution (\$)  \$20.00
<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#: _____ ) Myers, Fonda <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Myers, Fonda <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	Amount of Contribution (\$)  \$20.00
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#: _____ ) Myers, Pat (Mrs.) <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 02/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Najvar, Susan (Mrs.) <hr/> Contributor address; City; State; Zip Code  Gonzales, TX 78629	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/28 Rpt: 19/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 03/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nichols, Patricia S <hr/> <b>6</b> Contributor address; City; State; Zip Code  Yoakum, TX 77995	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) n/a
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nichols, Patricia S <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Neill, Carl (Mr.) <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) former mayor		Employer (See Instructions) City of Yoakum, TX
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Neill, Linda (Mrs.) <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) P/T Treas.		Employer (See Instructions) Holy Cross Lutheran Ch.
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Neill, Linda (Mrs.) <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) P/T Treas.		Employer (See Instructions) Holy Cross Lutheran Ch.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/28 Rpt: 20/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 01/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pearce, Jaime Gish <hr/> <b>6</b> Contributor address; City; State; Zip Code  Yoakum, TX 77995	<b>7</b> Amount of Contribution (\$)  \$45.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) N/A
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pearce, Jaime Gish <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pearce, Jaime Gish <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pearce, Jaime Gish <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pearce, Jaime Gish <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/28 Rpt: 21/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 06/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pearce, Jaime Gish <hr/> <b>6</b> Contributor address; City; State; Zip Code  Yoakum, TX 77995	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) N/A
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Repka, Betty <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	Amount of Contribution (\$)  \$20.00
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#: _____ ) Repka, Betty <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Repka, Betty <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	Amount of Contribution (\$)  \$20.00
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#: _____ ) Repka, Betty <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	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: 19/28 Rpt: 22/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 06/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Repka, Betty <hr/> <b>6</b> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions)
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Repka, Shara <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Repka, Shara <hr/> Contributor address; City; State; Zip Code  Hallettsville, TX 77964	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, Anita (Ms.) <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Mayor		Employer (See Instructions) City of Yoakum
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, Annie (Ms.) <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Mayor		Employer (See Instructions) City of Yoakum

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/28 Rpt: 23/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 06/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, Annie (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Yoakum, TX 77995	
<b>8</b> Principal occupation / Job title (See Instructions) Mayor		<b>9</b> Employer (See Instructions) City of Yoakum
<b>Date</b> 05/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ruppert, Lindsay	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  Yoakum, TX 77995	
<b>Principal occupation / Job title (See Instructions)</b> JP1		<b>Employer (See Instructions)</b> Dewitt County
<b>Date</b> 05/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ruppert, Lindsay	<b>Amount of Contribution (\$)</b> \$35.00
	<b>Contributor address; City; State; Zip Code</b>  Yoakum, TX 77995	
<b>Principal occupation / Job title (See Instructions)</b> JP1		<b>Employer (See Instructions)</b> Dewitt County
<b>Date</b> 01/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Savage, Peggy	<b>Amount of Contribution (\$)</b> \$35.00
	<b>Contributor address; City; State; Zip Code</b>  Yorktown, TX 78164	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> n/a
<b>Date</b> 03/12/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schmidt, Keith	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Gonzales, TX 78629	
<b>Principal occupation / Job title (See Instructions)</b> county sheriff		<b>Employer (See Instructions)</b> County of Gonzales

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/28 Rpt: 24/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 01/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seidel, Jeannie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Westhoff, TX 77994	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) N/A
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seidel, Jeannie <hr/> Contributor address; City; State; Zip Code  Westhoff, TX 77994	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seidel, Jeannie <hr/> Contributor address; City; State; Zip Code  Westhoff, TX 77994	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seidel, Jeannie <hr/> Contributor address; City; State; Zip Code  Westhoff, TX 77994	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sellars, Shirley <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/28 Rpt: 25/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 05/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sethness, Doug <hr/> <b>6</b> Contributor address; City; State; Zip Code  Cuero, TX 77954	<b>7</b> Amount of Contribution (\$)  \$10.00
<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#: _____ ) Sethness, Doug (Mr.) <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77954	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sethness, Mary <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77954	Amount of Contribution (\$)  \$10.00
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#: _____ ) Sitka, Elorine (Ms.) <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Strong, Carolyn <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/28 Rpt: 26/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 02/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tanner, Jerry (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Sublime, TX 77986	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) N/A
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tate, Sandra	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Cuero, TX 77954	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson-Draper, Cheryl (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Sheridan, TX 77475	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson-Draper, Cheryl (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Sheridan, TX 77475	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson-Draper, Cheryl (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Sheridan, TX 77475	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/28 Rpt: 27/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 06/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Urbanovsky, Steve (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Cuero, TX 77954	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) N/A
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Urbanovsky, Tresa (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Cuero, TX 77954	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Slooten, Karl	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Yoakum, TX 77995	
Principal occupation / Job title (See Instructions) police chief		Employer (See Instructions) City of Yoakum
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Slooten, Karl	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Yoakum, TX 77995	
Principal occupation / Job title (See Instructions) police chief		Employer (See Instructions) City of Yoakum
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Slooten, Xoxhitl	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Yoakum, TX 77995	
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) LMC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/28 Rpt: 28/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 05/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vickers, John (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Yoakum, TX 77995	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) N/A
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vickers, Vicki (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Yoakum, TX 77995	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 01/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vickers, Vicki (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Yoakum, TX 77995	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vickers, Vicki (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Yoakum, TX 77995	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vickers, Vicki (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Yoakum, TX 77995	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/28 Rpt: 29/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 05/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Pam <hr/> <b>6</b> Contributor address; City; State; Zip Code  Yoakum, TX 77995	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Realtor		<b>9</b> Employer (See Instructions) self
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Pam <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) self
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wauson, Laura <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) general contractor
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wauson, Laura <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) general contractor
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wauson, Laura <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) general contractor

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/28 Rpt: 30/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 06/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wauson, Laura <hr/> <b>6</b> Contributor address; City; State; Zip Code  Yoakum, TX 77995	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) self		<b>9</b> Employer (See Instructions) general contractor
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wauson, Laura <hr/> Contributor address; City; State; Zip Code  Yoakum, TX 77995	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) general contractor
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wenske , Mary Ann (Mrs.) <hr/> Contributor address; City; State; Zip Code  Moulton, TX 77975	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wessels, Pat <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77954	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wessels, Pat <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77954	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/28 Rpt: 31/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 01/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilson, Cheryl	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>6</b> Contributor address; City; State; Zip Code  Cuero, TX 77954		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) N/A
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilson, Cheryl	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Cuero, TX 77954		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilson, Cheryl	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Cuero, TX 77954		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yamarick, Paul (Mr.)	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Moulton, TX 77975		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

# PLEGGED CONTRIBUTIONS

## SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:  
Sch: 1/1 Rpt: 32/43

2 FILER NAME  
Republican Women of Yoakum Area

3 Filer ID (Ethics Commission Filers)  
00055358

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

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

8 Amount of  
pledge (\$)

9 In-kind description  
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 33/43
<b>2</b> FILER NAME Republican Women of Yoakum Area		<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b> 0.00
<b>5</b> Date of loan	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	<b>9</b> Loan Amount (\$)
<b>6</b> Is lender a financial institution?	<b>8</b> Lender address; City; State; Zip Code	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions)		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral <input type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION <input type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/8 Rpt: 34/43	<b>2</b> FILER NAME Republican Women of Yoakum Area	<b>3</b> Filer ID (Ethics Commission Filers) 00055358
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<b>4</b> Date 06/05/2025	<b>5</b> Payee name Axel Decorations
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<b>6</b> Amount (\$) \$621.63  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 310 Front St  Yoakum, TX 77995
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 50% down table coverings for Taste of Victory
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/14/2025	Payee name Chandler, Sandra
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Amount (\$) \$15.84  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 966 FM 318 E  Yoakum, TX 77995
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimb for meal items
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/21/2025	Payee name Cherry, Christina
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Amount (\$) \$192.43  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 817 CR 435  Yoakum, TX 77995
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimb for meeting meal
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/8 Rpt: 35/43	<b>2</b> FILER NAME Republican Women of Yoakum Area	<b>3</b> Filer ID (Ethics Commission Filers) 00055358
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<b>4</b> Date 06/11/2025	<b>5</b> Payee name Cherry, Christina
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<b>6</b> Amount (\$) \$500.24  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 817 CR 435  Yoakum, TX 77995
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimb for items for meal
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/13/2025	Payee name Dewitt Poth & Son
--------------------	---------------------------------

Amount (\$) \$125.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 487  Yoakum, TX 77995
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense tickets Taste of Victory
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/02/2025	Payee name GHCFRW PAC
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Amount (\$) \$30.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13385 Powers Rd  Hamshire, TX 77622
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense annual dues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 3/8 Rpt: 36/43	<b>2</b>	FILER NAME Republican Women of Yoakum Area	<b>3</b>	Filer ID (Ethics Commission Filers) 00055358	
<b>4</b>	Date 04/14/2025	<b>5</b>	Payee name Pavliska, Mary			
<b>6</b>	Amount (\$) \$200.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b>	Payee address; City; State; Zip Code 302 Live Oak St  Hallettsville, TX 77964			
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meal for meeting			
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
	Date 02/12/2025		Payee name Sandy's Wingz & Thingz			
	Amount (\$) \$120.00  <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 140 Auction Ring Road  Hallettsville, TX 77964			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting meal expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
	Date 03/12/2025		Payee name Sandy's Wingz & Thingz			
	Amount (\$) \$180.00  <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 140 Auction Ring Road  Hallettsville, TX 77964			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting meal			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/8 Rpt: 37/43	<b>2</b> FILER NAME Republican Women of Yoakum Area	<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 06/11/2025	<b>5</b> Payee name Square, Inc.	
<b>6</b> Amount (\$) \$20.95  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 67 Fairbanks Ave  Irvine, CA 92618	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee for tickets; Taste of Victory
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/09/2025	Candidate/Officeholder name TFRW	
Amount (\$) \$250.00  <input type="checkbox"/> Expenditure from corporate funds	Office sought PO Box 171146  Austin, TX 78717-0041	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW memberships
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/17/2025	Candidate/Officeholder name TFRW	
Amount (\$) \$325.00  <input type="checkbox"/> Expenditure from corporate funds	Office sought PO Box 171146  Austin, TX 78717-0041	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/8 Rpt: 38/43	<b>2</b> FILER NAME Republican Women of Yoakum Area	<b>3</b> Filer ID (Ethics Commission Filers) 00055358
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<b>4</b> Date 03/13/2025	<b>5</b> Payee name TFRW
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<b>6</b> Amount (\$) \$225.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 171146  Austin, TX 78717-0041
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership dues
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/10/2025	Payee name TFRW
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Amount (\$) \$125.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 171146  Austin, TX 78717-0041
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership dues
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/11/2025	Payee name TFRW
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Amount (\$) \$50.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 171146  Austin, TX 78717-0041
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership dues
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/8 Rpt: 39/43	<b>2</b> FILER NAME Republican Women of Yoakum Area	<b>3</b> Filer ID (Ethics Commission Filers) 00055358
<b>4</b> Date 01/01/2025	<b>5</b> Payee name TFRW	
<b>6</b> Amount (\$) \$245.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 171146  Austin, TX 78717-0041	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership dues
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/21/2025	Candidate/Officeholder name Yoakum Chamber of Commerce	
Amount (\$) \$50.00  <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. Box 591  Yoakum, TX 77995	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense annual dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/10/2025	Candidate/Officeholder name Yoakum Community Center	
Amount (\$) \$395.60  <input type="checkbox"/> Expenditure from corporate funds	Office sought 105 Huck St  Yoakum, TX 77995	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting hall rental
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/8 Rpt: 40/43	<b>2</b> FILER NAME Republican Women of Yoakum Area	<b>3</b> Filer ID (Ethics Commission Filers) 00055358
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<b>4</b> Date 02/19/2025	<b>5</b> Payee name Yoakum Community Center
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<b>6</b> Amount (\$) \$365.20  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 105 Huck St  Yoakum, TX 77995
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting hall rental
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/12/2025	Payee name Yoakum Community Center
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Amount (\$) \$365.20  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 105 Huck St  Yoakum, TX 77995
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting hall rental
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/14/2025	Payee name Yoakum Community Center
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Amount (\$) \$365.20  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 105 Huck St  Yoakum, TX 77995
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting hall rental
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/8 Rpt: 41/43	<b>2</b> FILER NAME Republican Women of Yoakum Area	<b>3</b> Filer ID (Ethics Commission Filers) 00055358
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<b>4</b> Date 05/20/2025	<b>5</b> Payee name Yoakum Community Center
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<b>6</b> Amount (\$) \$380.40  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 105 Huck St  Yoakum, TX 77995
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting hall rental
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/13/2025	Payee name Yoakum Community Center
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Amount (\$) \$380.40  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 105 Huck St  Yoakum, TX 77995
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting hall rental
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/2 Rpt:		2 FILER NAME Republican Women of Yoakum Area		3 Filer ID (Ethics Commission Filers) 00055358	
4 Date 01/01/2025		5 Payee name Yoakum Self Storage			
6 Amount (\$) 60.00 <input type="checkbox"/> Expenditure from corporate funds		7 Payee Address; City; State; Zip 300 River Bend Dr Georgetown, TX 78628			
8 PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense		(b) Description (See instructions regarding type of information required.) monthly storage	
Date 02/01/2025		Payee name Yoakum Self Storage			
Amount (\$) 60.00 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 300 River Bend Dr Georgetown, TX 78628			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense		(b) Description (See instructions regarding type of information required.) monthly storage	
Date 03/01/2025		Payee name Yoakum Self Storage			
Amount (\$) 60.00 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 300 River Bend Dr Georgetown, TX 78628			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense		(b) Description (See instructions regarding type of information required.) monthly storage	
Date 04/01/2025		Payee name Yoakum Self Storage			
Amount (\$) 60.00 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 300 River Bend Dr Georgetown, TX 78628			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense		(b) Description (See instructions regarding type of information required.) monthly storage	

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/2 Rpt:	2 FILER NAME Republican Women of Yoakum Area	3 Filer ID (Ethics Commission Filers) 00055358
4 Date 05/01/2025	5 Payee name Yoakum Self Storage	
6 Amount (\$) 60.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 300 River Bend Dr  Georgetown, TX 78628	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) monthly storage
Date 06/01/2025	Payee name Yoakum Self Storage	
Amount (\$) 60.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 300 River Bend Dr  Georgetown, TX 78628	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) monthly storage