

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers) 00082689		2 Total pages filed: 9		OFFICE USE ONLY	
3 COMMITTEE NAME Rusk County Republican Women				Date Received ELECTRONICALLY FILED 07/14/2025	
4 TREASURER NAME Baker, Sherri (Mrs.)				Date Hand-delivered or Date Postmarked	
5 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election		<input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer resignation <input type="checkbox"/> Dissolution report <input type="checkbox"/> Other (specify) _____	
6 ORIGINAL PERIOD COVERED		Month Day Year 01/11/2025		THROUGH Month Day Year 06/30/2025	
				Receipt # Amount	
				Date Processed	
				Date Imaged	

7 EXPLANATION OF CORRECTION

\$320 TFRW Fees were left off the original report. Check was written in December 2024, but not processed through bank account until January 2025 bank statement.

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

☒ **Semiannual reports:** I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☒ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mrs. Sherri Baker

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00082689	2 Total pages filed: 9	
3 COMMITTEE NAME Rusk County Republican Women			OFFICE USE ONLY	
			Date Received ELECTRONICALLY FILED 07/14/2025	
			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
			Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO BOX 825 Henderson, TX 75653			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Sherri NICKNAME LAST SUFFIX Baker			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 9140 CR451D Laneville, TX 75667			
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 9140 CR451D Laneville, TX 75667			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (903) 646-3221			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff			
10 PERIOD COVERED	Month Day Year 01/11/2025 THROUGH Month Day Year 06/30/2025			
11 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Rusk County Republican Women	13 Filer ID (Ethics Commission Filers) 00082689
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 190.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,353.78
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 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.

Mrs. Sherri Baker

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
4 of 9

17 COMMITTEE NAME Rusk County Republican Women		18 Filer ID (Ethics Commission Filers) 00082689
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 190.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
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 type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 755.20
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/2 Rpt: 5/9
2 FILER NAME Rusk County Republican Women		3 Filer ID (Ethics Commission Filers) 00082689
4 Date 01/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorsey, Barbara 6 Contributor address; City; State; Zip Code Tyler, TX 75701	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, Tina Contributor address; City; State; Zip Code Henderson, TX 75654	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Hospice		Employer (See Instructions)
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Stan Contributor address; City; State; Zip Code Kilgore, TX 75662	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Agricultural Worker		Employer (See Instructions)
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sargonson, Karen Contributor address; City; State; Zip Code Henderson, TX 75652	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Cindy Contributor address; City; State; Zip Code Henderson, TX 75652	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 2/2 Rpt: 6/9

2 FILER NAME

Rusk County Republican Women

3 Filer ID (Ethics Commission Filers)
00082689

4 Date

01/31/2025

5 Full name of contributor

Wheatley, Susan

☐ out-of-state PAC (ID#: _____)

7 Amount of Contribution (\$)

\$40.00

6 Contributor address; City; State; Zip Code

Kilgore, TX 75652

8 Principal occupation / Job title (See Instructions)

retired

9 Employer (See Instructions)

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/3 Rpt: 7/9	2 FILER NAME Rusk County Republican Women	3 Filer ID (Ethics Commission Filers) 00082689
4 Date 04/24/2025	5 Payee name Hand, Neva	
6 Amount (\$) 25.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1405 Shawnee Henderson, TX 75654	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required.) ABC's of Leadership-Mineola, TX
Date 01/29/2025	Payee name Rusk County Expo Center	
Amount (\$) 50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3303 FM 13 Henderson, TX 75654	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Meeting
Date 02/24/2025	Payee name Rusk County Expo Center	
Amount (\$) 50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3303 FM 13 Henderson, TX 75654	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Meeting
Date 03/24/2025	Payee name Rusk County Expo Center	
Amount (\$) 50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3303 FM 13 Henderson, TX 75654	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Meeting

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/3 Rpt: 8/9	2 FILER NAME Rusk County Republican Women	3 Filer ID (Ethics Commission Filers) 00082689
4 Date 04/28/2025	5 Payee name Rusk County Expo Center	
6 Amount (\$) 50.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 3303 FM 13 Henderson, TX 75654	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Meeting
Date 03/24/2025	Payee name Stanley, Kella	
Amount (\$) 25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2881 CR 121D Overton, TX 75684	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required.) ABC's of Leadership-Mineola, TX
Date 03/25/2025	Payee name TFRW	
Amount (\$) 101.20 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 N Highway 183 Suite J4 Austin, TX 78750	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Membership Fees
Date 01/13/2025	Payee name TFRW	
Amount (\$) 320.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 N Highway 183 Suite J4 Austin, TX 78750	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fees

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/3 Rpt: 9/9	2 FILER NAME Rusk County Republican Women	3 Filer ID (Ethics Commission Filers) 00082689
4 Date 02/24/2025	5 Payee name US Postal Service	
6 Amount (\$) 84.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 505 S Main Henderson, TX 75652	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Annual PO Box fee