

**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) 00054591	2 Total pages filed: 144		
3 COMMITTEE NAME Galveston Republican Women - PAC		OFFICE USE ONLY			
		Date Received ELECTRONICALLY FILED 01/06/2026			
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address 908 Layfair Place Friendswood, TX 77546-5414		Date Hand-delivered or Date Postmarked			
		Receipt #	Amount		
		Date Processed			
		Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Tina S.	FIRST MI			
	NICKNAME Kirbie	LAST SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 908 Layfair Place Friendswood, TX 77546-5414	APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 908 Layfair Place Friendswood, TX 77546-5414	APT / SUITE #;	CITY;	STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE (281) 482-2786	PHONE NUMBER	EXTENSION		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input 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"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year 07/01/2025	Month Day Year THROUGH 12/31/2025			
11 ELECTION	ELECTION DATE Month Day Year 07/01/2025	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Runoff <input type="checkbox"/> Special	ELECTION TYPE <input type="checkbox"/> Other	

GO TO PAGE 2

**GENERAL-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Galveston Republican Women - PAC		13 FILER ID (Ethics Commission Filers) 00054591
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)	\$ 29,231.74
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 27,961.43
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 43,758.62
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
16 AFFIDAVIT		
<p>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.</p> <p style="text-align: right;">Tina S. Kirbie</p> <hr/> <p style="text-align: right;">Signature of Campaign Treasurer</p>		
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.		
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 144

17 COMMITTEE NAME Galveston Republican Women - PAC	18 FILER ID (Ethics Commission Filers) 00054591
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 29,231.74	
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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 27,961.43	
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 type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
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: 1/124 Rpt: 4/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Eileen	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Hitchcock, TX 77563	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albrecht, Maggie	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) State Representative-Terri Leo-Wilson
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Gwenda	Amount of Contribution (\$) \$105.00
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen-Watson, Kayla	Amount of Contribution (\$) \$27.27
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) Chief ADA		Employer (See Instructions) Galveston County-Criminal District Attorney's Office
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Dorota	Amount of Contribution (\$) \$74.17
	Contributor address; City; State; Zip Code Midland, TX 79705	
Principal occupation / Job title (See Instructions) Travel Agent		Employer (See Instructions) Anderson Travel

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/124 Rpt: 5/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appfel, Darrell 6 Contributor address; City; State; Zip Code League City, TX 77573	7 Amount of Contribution (\$) \$74.17
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self Employed
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appfel, Darrell Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Robin Contributor address; City; State; Zip Code Friendswood, TX 77549	Amount of Contribution (\$) \$59.51
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Armstrong Medical Group
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Robin Contributor address; City; State; Zip Code Friendswood, TX 77549	Amount of Contribution (\$) \$37.04
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Armstrong Medical Group
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atchley, Brenda Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 3/124 Rpt: 6/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor Banks, Jane 6 Contributor address; City; State; Zip Code League City, TX 77573	7 Amount of Contribution (\$) \$10.00	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 12/24/2025	Full name of contributor Banks, Jane Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$35.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 09/23/2025	Full name of contributor Bargas, Jared Contributor address; City; State; Zip Code San Leon, TX 77539	Amount of Contribution (\$) \$37.04	
Principal occupation / Job title (See Instructions) District Director		Employer (See Instructions) Congressman Randy Weber	
Date 11/05/2025	Full name of contributor Bassett, Katherine Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$125.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/12/2025	Full name of contributor Bassett, Katherine Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$10.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/124 Rpt: 7/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bassett, Katherine 6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bassett, Robert Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Joyce Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Joyce Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Joyce Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/124 Rpt: 8/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Joyce	7 Amount of Contribution (\$) \$125.00
	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Joyce	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Joyce	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Joyce	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Joyce	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/124 Rpt: 9/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bentley, Geri	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code League City, TX 77573	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Sandra	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bohlman, Mary	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Owner/Customer Service Representative		Employer (See Instructions) Bohlman Farmers Insurance Agency
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bohlman, Mary	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Owner/Customer Service Representative		Employer (See Instructions) Bohlman Farmers Insurance Agency
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bohlman, Mary	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Owner/Customer Service Representative		Employer (See Instructions) Bohlman Farmers Insurance Agency

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/124 Rpt: 10/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boney, Brad 6 Contributor address; City; State; Zip Code League City, TX 77573	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Mediator		9 Employer (See Instructions) Self Employed
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnen, Greg Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Neurosurgeon/TX State Representative		Employer (See Instructions) Houston Physicians Hospital/ State of Texas
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnen, Greg Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Neurosurgeon/TX State Representative		Employer (See Instructions) Houston Physicians Hospital/ State of Texas
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnen, Greg Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Neurosurgeon/TX State Representative		Employer (See Instructions) Houston Physicians Hospital/ State of Texas
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnen, Greg Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Neurosurgeon/TX State Representative		Employer (See Instructions) Houston Physicians Hospital/ State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/124 Rpt: 11/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnen, Greg	7 Amount of Contribution (\$) \$80.00
	6 Contributor address; City; State; Zip Code Friendswood, TX 77546	
8 Principal occupation / Job title (See Instructions) Neurosurgeon/TX State Representative		9 Employer (See Instructions) Houston Physicians Hospital/ State of Texas
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnen, Greg	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Neurosurgeon/TX State Representative		Employer (See Instructions) Houston Physicians Hospital/ State of Texas
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnen, Greg	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Neurosurgeon/TX State Representative		Employer (See Instructions) Houston Physicians Hospital/ State of Texas
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnen, Greg	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Neurosurgeon/TX State Representative		Employer (See Instructions) Houston Physicians Hospital/ State of Texas
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borda, Laura	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Houston, TX 77025	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 9/124 Rpt: 12/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/04/2025	5 Full name of contributor Broussard, Janice	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Pearland, TX 77581		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 09/24/2025	Full name of contributor Broussard, Janice	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Pearland, TX 77581		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 09/30/2025	Full name of contributor Broussard, Janice	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Pearland, TX 77581		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/05/2025	Full name of contributor Broussard, Janice	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Pearland, TX 77581		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/20/2025	Full name of contributor Broussard, Janice	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code Pearland, TX 77581		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/124 Rpt: 13/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor Broussard, Janice	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Pearland, TX 77581	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor Broussard, Janice	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Pearland, TX 77581	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor Brown, Sarah	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Texas City, TX 77591	
Principal occupation / Job title (See Instructions) Nurse Auditor		Employer (See Instructions) UTMB.
Date 11/05/2025	Full name of contributor Bruno, Gina	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Director of Billing		Employer (See Instructions) Stonegate Center, LLC
Date 11/20/2025	Full name of contributor Bruno, Gina	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Director of Billing		Employer (See Instructions) Stonegate Center, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 11/124 Rpt: 14/144
2 FILER NAME Galveston Republican Women - PAC				3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor Bruno, Gina	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$35.00	
	6 Contributor address; City; State; Zip Code Galveston, TX 77554			
8 Principal occupation / Job title (See Instructions) Director of Billing		9 Employer (See Instructions) Stonegate Center, LLC		
Date 11/05/2025	Full name of contributor Bubrig, Karen	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$20.00	
	Contributor address; City; State; Zip Code Friendswood, TX 77546			
Principal occupation / Job title (See Instructions) Law Enforcement Alliance		Employer (See Instructions) Self		
Date 08/02/2025	Full name of contributor Buckley, Linda	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$54.63	
	Contributor address; City; State; Zip Code Hitchcock, TX 77563			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 09/26/2025	Full name of contributor Buckley, Linda	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$31.00	
	Contributor address; City; State; Zip Code Hitchcock, TX 77563			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 09/30/2025	Full name of contributor Buckley, Linda	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$100.00	
	Contributor address; City; State; Zip Code Hitchcock, TX 77563			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/124 Rpt: 15/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Linda	7 Amount of Contribution (\$) \$70.00
	6 Contributor address; City; State; Zip Code Hitchcock, TX 77563	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Linda	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Hitchcock, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Linda	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Hitchcock, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Linda	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Hitchcock, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Linda	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Hitchcock, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/124 Rpt: 16/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Linda	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Hitchcock, TX 77563	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Mike	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Hitchcock, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Mike	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Hitchcock, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Mike	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Hitchcock, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bumpas, Donna	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 14/124 Rpt: 17/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bumpas, Donna	7 Amount of Contribution (\$) \$35.00	
	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bumpas, Donna	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bumpas, Donna	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bumpas, Donna	Amount of Contribution (\$) \$80.00	
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Sigrun	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 15/124 Rpt: 18/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor Burke, Sigrun	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 10/20/2025	Full name of contributor Burke, Sigrun	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/20/2025	Full name of contributor Burke, Sigrun	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/24/2025	Full name of contributor Burke, Sigrun	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 09/23/2025	Full name of contributor Butcher, Cyndy	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Houston, TX 77573		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) Representative Greg Bonnen	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/124 Rpt: 19/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butcher, Cyndy	7 Amount of Contribution (\$) \$23.00
	6 Contributor address; City; State; Zip Code Houston, TX 77573	
8 Principal occupation / Job title (See Instructions) District Manager		9 Employer (See Instructions) Representative Greg Bonnen
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttner, LaWanda	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttner, LaWanda	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttner, LaWanda	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttner, LaWanda	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 17/124 Rpt: 20/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor Buttner, LaWanda 6 Contributor address; City; State; Zip Code Galveston, TX 77551	7 Amount of Contribution (\$) \$35.00	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 10/20/2025	Full name of contributor Cagnon, Jennifer Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$74.17	
Principal occupation / Job title (See Instructions) Jail Captain		Employer (See Instructions) Galveston County Sheriff's Office	
Date 08/04/2025	Full name of contributor Card, Fran Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$50.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 09/24/2025	Full name of contributor Card, Fran Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$70.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 09/26/2025	Full name of contributor Card, Fran Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$31.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/124 Rpt: 21/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/30/2025	5 Full name of contributor Card, Fran 6 Contributor address; City; State; Zip Code Galveston, TX 77551	7 Amount of Contribution (\$) \$100.00
	8 Principal occupation / Job title (See Instructions) Retired	9 Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor Card, Fran Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$70.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor Card, Fran Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$250.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor Card, Fran Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$70.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor Card, Fran Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$65.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/124 Rpt: 22/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor Card, Fran	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77551	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor Carpenter, J L	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) J L Carpenter Law Office
Date 12/24/2025	Full name of contributor Carpenter, Vikki	Amount of Contribution (\$) \$55.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor Carpenter, Vikki	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor Carpenter, Vikki	Amount of Contribution (\$) \$105.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 20/124 Rpt: 23/144
2 FILER NAME Galveston Republican Women - PAC				3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor Chase, Kim	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$35.00	
	6 Contributor address; City; State; Zip Code League City, TX 77573			
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A		
Date 11/21/2025	Full name of contributor Chase, Kim	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code League City, TX 77573			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 12/24/2025	Full name of contributor Chase, Kim	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$53.00	
	Contributor address; City; State; Zip Code League City, TX 77573			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 12/24/2025	Full name of contributor Chase, Kim	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code League City, TX 77573			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 10/20/2025	Full name of contributor Chenlo, Jodie	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Galveston, TX 77550			
Principal occupation / Job title (See Instructions) Digital Advertising		Employer (See Instructions) Spiess Media Group		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/124 Rpt: 24/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chenlo, Jodie	7 Amount of Contribution (\$) \$70.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Digital Advertising		9 Employer (See Instructions) Spiess Media Group
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chenlo, Jodie	Amount of Contribution (\$) \$74.17
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Digital Advertising		Employer (See Instructions) Spiess Media Group
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chenlo, Jodie	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Digital Advertising		Employer (See Instructions) Spiess Media Group
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chenlo, Jodie	Amount of Contribution (\$) \$8.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Digital Advertising		Employer (See Instructions) Spiess Media Group
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cherry, Sandra	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/124 Rpt: 25/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor Cody, Diana	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77554	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor Cody, Dianna	Amount of Contribution (\$) \$46.81
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/02/2025	Full name of contributor Cook, Landa	Amount of Contribution (\$) \$54.63
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor Cook, Landa	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/23/2025	Full name of contributor Cook, Landa	Amount of Contribution (\$) \$72.22
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/124 Rpt: 26/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Sandra	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77551	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Saundra	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Pearlie	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Alvin, TX 77511	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Pearlie	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Alvin, TX 77511	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Pearlie	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Alvin, TX 77511	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/124 Rpt: 27/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Pearly	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Alvin, TX 77511	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Cheryl	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code La Marque, TX 77568	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Cheryl	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code La Marque, TX 77568	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Cheryl	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code La Marque, TX 77568	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Cheryl	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code La Marque, TX 77568	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/124 Rpt: 28/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Cheryl	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code La Marque, TX 77568	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croft, Cindy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croft, Cindy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croft, Cindy	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croft, Cindy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/124 Rpt: 29/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cusik, Donna	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Dickinson, TX 77539	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cusik, Donna	Amount of Contribution (\$) \$74.17
	Contributor address; City; State; Zip Code Dickinson, TX 77539	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cusik, Kenneth	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Dickinson, TX 77539	
Principal occupation / Job title (See Instructions) Galveston County Criminal District Attorney		Employer (See Instructions) Galveston County
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cusik, Kenneth	Amount of Contribution (\$) \$74.17
	Contributor address; City; State; Zip Code Dickinson, TX 77539	
Principal occupation / Job title (See Instructions) Galveston County Criminal District Attorney		Employer (See Instructions) Galveston County
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darring, Anne	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Texas City, TX 77590	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/124 Rpt: 30/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Beverly	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Liberty, TX 77575	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Beverly	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Liberty, TX 77575	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Beverly	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Liberty, TX 77575	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Beverly	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Liberty, TX 77575	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Beverly	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Liberty, TX 77575	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/124 Rpt: 31/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Beverly	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Liberty, TX 77575	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Mosette	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Mosette	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Mosette	Amount of Contribution (\$) \$31.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Mosette	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/124 Rpt: 32/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Mosette	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Mosette	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Mosette	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Mosette	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dimitrov, Patty	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Owner-American Proud Insurance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 30/124 Rpt: 33/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dreith, Clayton	7 Amount of Contribution (\$) \$50.00	
	6 Contributor address; City; State; Zip Code Galveston, TX 77551		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dreith, Clayton	Amount of Contribution (\$) \$70.00	
	Contributor address; City; State; Zip Code Galveston, TX 77551		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dreith, Clayton	Amount of Contribution (\$) \$70.00	
	Contributor address; City; State; Zip Code Galveston, TX 77551		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dreith, Clayton	Amount of Contribution (\$) \$65.00	
	Contributor address; City; State; Zip Code Galveston, TX 77551		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dreith, Clayton	Amount of Contribution (\$) \$70.00	
	Contributor address; City; State; Zip Code Galveston, TX 77551		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/124 Rpt: 34/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dreith, Linda	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77551	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Driscoll, Loretta	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Santa Fe, TX 77510	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Driscoll, Loretta	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Santa Fe, TX 77510	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dugie, Hank	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) Business Owner-Real Estate		Employer (See Instructions) Self Employed
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dugie, Hank	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) Business Owner-Real Estate		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 32/124 Rpt: 35/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duty, Cynthia	7 Amount of Contribution (\$) \$50.00	
	6 Contributor address; City; State; Zip Code Hitchcock, TX 77563		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duty, Cynthia	Amount of Contribution (\$) \$37.04	
	Contributor address; City; State; Zip Code Hitchcock, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duty, Cynthia	Amount of Contribution (\$) \$31.00	
	Contributor address; City; State; Zip Code Hitchcock, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duty, Cynthia	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Hitchcock, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duty, Cynthia	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Hitchcock, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 33/124 Rpt: 36/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/20/2025	5 Full name of contributor Duty, Cynthia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Hitchcock, TX 77563		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 11/21/2025	Full name of contributor Duty, Cynthia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Hitchcock, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/23/2025	Full name of contributor Duty, Cynthia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Hitchcock, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/24/2025	Full name of contributor Duty, Cynthia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Hitchcock, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/23/2025	Full name of contributor Edinburgh, Paul	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$119.12
	Contributor address; City; State; Zip Code Santa Fe, TX 77517		
Principal occupation / Job title (See Instructions) Constable-Pct.#2		Employer (See Instructions) Galveston County	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/124 Rpt: 37/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edinburgh, Paul 6 Contributor address; City; State; Zip Code Santa Fe, TX 77517	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Constable-Pct.#2		9 Employer (See Instructions) Galveston County
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eshelman, Dale Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$74.17
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eshelman, Paula Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$46.81
Principal occupation / Job title (See Instructions) Mayor		Employer (See Instructions) Bayou Vista
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eshelman, Paula Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$27.27
Principal occupation / Job title (See Instructions) Mayor		Employer (See Instructions) Bayou Vista
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eshelman, Paula Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 35/124 Rpt: 38/144
2 FILER NAME Galveston Republican Women - PAC				3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor Eshelman, Paula	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$35.00	
	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563			
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A		
Date 12/24/2025	Full name of contributor Ewing, Jack	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Dickinson, TX 77539			
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Galveston County		
Date 09/24/2025	Full name of contributor Falgout, Susan	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Galveston, TX 77551			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 11/20/2025	Full name of contributor Falgout, Susan	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Galveston, TX 77551			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 11/21/2025	Full name of contributor Falgout, Susan	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Galveston, TX 77551			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/124 Rpt: 39/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor Falgout, Susan	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77551	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor Fisher, Emily	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Family Associate Judge		Employer (See Instructions) Galveston County
Date 09/26/2025	Full name of contributor Fisher, Emily	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Family Associate Judge		Employer (See Instructions) Galveston County
Date 11/20/2025	Full name of contributor Fisher, Emily	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Family Associate Judge		Employer (See Instructions) Galveston County
Date 12/24/2025	Full name of contributor Fisher, Emily	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Family Associate Judge		Employer (See Instructions) Galveston County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 37/124 Rpt: 40/144
2 FILER NAME Galveston Republican Women - PAC				3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foley-Cromie, Kerri (Ms.)			7 Amount of Contribution (\$) \$54.63
	6 Contributor address; City; State; Zip Code League City, TX 77573			
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Galveston County		
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foley-Cromie, Kerri (Ms.)			Amount of Contribution (\$) \$81.90
	Contributor address; City; State; Zip Code League City, TX 77573			
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Galveston County		
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foley-Cromie, Kerri (Ms.)			Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code League City, TX 77573			
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Galveston County		
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foley-Cromie, Kerri (Ms.)			Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code League City, TX 77573			
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Galveston County		
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foley-Cromie, Kerri (Ms.)			Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code League City, TX 77573			
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Galveston County		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/124 Rpt: 41/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frankfort, Todd	7 Amount of Contribution (\$) \$37.04
	6 Contributor address; City; State; Zip Code Houston, TX 77027	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) O'Neil Wysocki, PC
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frederickson, Cathy	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Neurobiotex, Inc.
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frederickson, Cathy	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Neurobiotex, Inc.
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frederickson, Cathy	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Neurobiotex, Inc.
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frederickson, Cathy	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Neurobiotex, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 39/124 Rpt: 42/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fullen, Jimmy 6 Contributor address; City; State; Zip Code Dickinson, TX 77539	7 Amount of Contribution (\$) \$25.00	
8 Principal occupation / Job title (See Instructions) Sheriff		9 Employer (See Instructions) Galveston County	
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fullen, Jimmy Contributor address; City; State; Zip Code Dickinson, TX 77539	Amount of Contribution (\$) \$20.00	
Principal occupation / Job title (See Instructions) Sheriff		Employer (See Instructions) Galveston County	
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fullen, Jimmy Contributor address; City; State; Zip Code Dickinson, TX 77539	Amount of Contribution (\$) \$111.30	
Principal occupation / Job title (See Instructions) Sheriff		Employer (See Instructions) Galveston County	
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gappa, Laura Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$27.27	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaudin, Lizette Contributor address; City; State; Zip Code Kemah, TX 77565	Amount of Contribution (\$) \$50.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/124 Rpt: 43/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaudin, Lizette	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Kemah, TX 77565	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaudin, Lizette	Amount of Contribution (\$) \$31.00
	Contributor address; City; State; Zip Code Kemah, TX 77565	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaudin, Lizette	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Kemah, TX 77565	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaudin, Lizette	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Kemah, TX 77565	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaudin, Lizette	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Kemah, TX 77565	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/124 Rpt: 44/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaudin, Lizette	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Kemah, TX 77565	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giusti, Joe	Amount of Contribution (\$) \$27.27
	Contributor address; City; State; Zip Code Santa Fe, TX 77510	
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Galveston County
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giusti, Joe	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Santa Fe, TX 77510	
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Galveston County
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giusti, Joe	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Santa Fe, TX 77510	
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Galveston County
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giusti, Joe	Amount of Contribution (\$) \$59.51
	Contributor address; City; State; Zip Code Santa Fe, TX 77510	
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Galveston County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/124 Rpt: 45/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor Grady, Patricia	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77554	
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Galveston County
Date 10/20/2025	Full name of contributor Grady, Patricia	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Galveston County
Date 11/05/2025	Full name of contributor Grady, Patricia	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Galveston County
Date 09/23/2025	Full name of contributor Graham, Pamela	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor Graham, Pamela	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 43/124 Rpt: 46/144
2 FILER NAME Galveston Republican Women - PAC				3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/23/2025	5 Full name of contributor Guisti, Joe	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$74.17	
	6 Contributor address; City; State; Zip Code Santa Fe, TX 77510			
8 Principal occupation / Job title (See Instructions) County Commissioner		9 Employer (See Instructions) Galveston County		
Date 11/21/2025	Full name of contributor Habel, Bruce	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$70.00	
	Contributor address; City; State; Zip Code Houston, TX 77059			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 12/24/2025	Full name of contributor Habel, Diane	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$30.00	
	Contributor address; City; State; Zip Code Houston, TX 77059			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 08/04/2025	Full name of contributor Hanson, Marcy	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code Galveston, TX 77551			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 09/24/2025	Full name of contributor Hanson, Marcy	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Galveston, TX 77551			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/124 Rpt: 47/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Marcy	7 Amount of Contribution (\$) \$46.81
	6 Contributor address; City; State; Zip Code Galveston, TX 77551	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Marcy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Marcy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Marcy	Amount of Contribution (\$) \$33.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Marcy	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/124 Rpt: 48/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Marcy	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77551	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Marcy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Marcy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Maureen	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self Employed
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, Adana	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) J.M.F. & Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/124 Rpt: 49/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, Adana 6 Contributor address; City; State; Zip Code Galveston, TX 77550	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) Accountant	9 Employer (See Instructions) J.M.F. & Associates
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, Adana Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$45.00
	Principal occupation / Job title (See Instructions) Accountant	Employer (See Instructions) J.M.F. & Associates
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, Adana Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Accountant	Employer (See Instructions) J.M.F. & Associates
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, D'Anne Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$45.00
	Principal occupation / Job title (See Instructions) General Manager	Employer (See Instructions) HGI
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, D'Anne Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$70.00
	Principal occupation / Job title (See Instructions) General Manager	Employer (See Instructions) HGI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 47/124 Rpt: 50/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/04/2025	5 Full name of contributor Henry, Betty	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 09/24/2025	Full name of contributor Henry, Betty	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 09/26/2025	Full name of contributor Henry, Betty	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$31.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 09/30/2025	Full name of contributor Henry, Betty	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 10/20/2025	Full name of contributor Henry, Betty	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/124 Rpt: 51/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Betty	7 Amount of Contribution (\$) \$33.00
	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Betty	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Betty	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Betty	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Betty	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 49/124 Rpt: 52/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor Henry, Betty	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563	7 Amount of Contribution (\$) \$35.00
	8 Principal occupation / Job title (See Instructions) Retired		
Date 12/24/2025	Full name of contributor Henry, Betty	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired		
Date 08/22/2025	Full name of contributor Henry, Irene	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Retired		
Date 09/30/2025	Full name of contributor Henry, Irene	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Retired		
Date 11/05/2025	Full name of contributor Henry, Irene	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$13.00
	Principal occupation / Job title (See Instructions) Retired		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 50/124 Rpt: 53/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/05/2025	5 Full name of contributor Henry, Irene	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563	7 Amount of Contribution (\$) \$125.00
	8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/12/2025	Full name of contributor Henry, Irene	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor Henry, Irene	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$45.00
	Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor Henry, Irene	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor Henry, Vaun	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 51/124 Rpt: 54/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor Henry, Vaun 6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563	7 Amount of Contribution (\$) \$70.00	
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Self Employed	
Date 11/20/2025	Full name of contributor Henry, Vaun Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$20.00	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed	
Date 11/21/2025	Full name of contributor Henry, Vaun Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$35.00	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed	
Date 12/24/2025	Full name of contributor Henry, Vaun Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$70.00	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed	
Date 10/20/2025	Full name of contributor Henson, Lori Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$10.00	
Principal occupation / Job title (See Instructions) Chief Executive Officer		Employer (See Instructions) Cuuisine for Healing	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/124 Rpt: 55/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henson, Lori	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77554	
8 Principal occupation / Job title (See Instructions) Chief Executive Officer		9 Employer (See Instructions) Cuisine for Healing
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henson, Lori	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Chief Executive Officer		Employer (See Instructions) Cuisine for Healing
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henson, Lori	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Chief Executive Officer		Employer (See Instructions) Cuisine for Healing
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herndon, Benjamin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Public Affairs		Employer (See Instructions) Self Employed
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herndon, Benjamin	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Public Affairs		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/124 Rpt: 56/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooten, Vicki	7 Amount of Contribution (\$) \$80.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooten, Vicki	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooten, Vikki	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horne, Sylvia	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horne, Sylvia	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 54/124 Rpt: 57/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/26/2025	5 Full name of contributor Horne, Sylvia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$31.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77550		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 11/05/2025	Full name of contributor Horne, Sylvia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$33.00
	Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/05/2025	Full name of contributor Horne, Sylvia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/05/2025	Full name of contributor Horne, Sylvia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/21/2025	Full name of contributor Horne, Sylvia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/124 Rpt: 58/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor Horne, Sylvia	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor Horne, Sylvia	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/23/2025	Full name of contributor Humphrey, Stan	Amount of Contribution (\$) \$59.51
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/23/2025	Full name of contributor Humphrey, Stan	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor Jackson, Debra	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Santa Fe, TX 77517	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 56/124 Rpt: 59/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Debra	7 Amount of Contribution (\$) \$35.00	
	6 Contributor address; City; State; Zip Code Santa Fe, TX 77517		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Debra	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Santa Fe, TX 77517		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Debra	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Santa Fe, TX 77517		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Debra	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Santa Fe, TX 77517		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Debra	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Santa Fe, TX 77517		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/124 Rpt: 60/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Debra	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Santa Fe, TX 77517	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jahnke, Renate	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jahnke, Renate	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jahnke, Renate	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamnik, Deborah	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 58/124 Rpt: 61/144
2 FILER NAME Galveston Republican Women - PAC				3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor Jimerson, Rebecca	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$35.00	
	6 Contributor address; City; State; Zip Code Tulsa, OK 74114			
8 Principal occupation / Job title (See Instructions) Community Engagement		9 Employer (See Instructions) Tulsa County Sheriff's Office		
Date 10/20/2025	Full name of contributor Jimerson, Rebecca	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Tulsa, OK 74114			
Principal occupation / Job title (See Instructions) Community Engagement		Employer (See Instructions) Tulsa County Sheriff's Office		
Date 12/23/2025	Full name of contributor Jimerson, Rebecca	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$37.04	
	Contributor address; City; State; Zip Code Tulsa, OK 74114			
Principal occupation / Job title (See Instructions) Community Engagement		Employer (See Instructions) Tulsa County Sheriff's Office		
Date 12/24/2025	Full name of contributor Jimerson, Rebecca	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$100.00	
	Contributor address; City; State; Zip Code Tulsa, OK 74114			
Principal occupation / Job title (See Instructions) Community Engagement		Employer (See Instructions) Tulsa County Sheriff's Office		
Date 10/20/2025	Full name of contributor Johns, Kelly	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$37.04	
	Contributor address; City; State; Zip Code Texas City, TX 77591			
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Carnes Funeral Home		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/124 Rpt: 62/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Don	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Friendswood, TX 77546	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Julie	Amount of Contribution (\$) \$74.17
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Executive Director & RN		Employer (See Instructions) Pregnancy Health Center of Galveston
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jeth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Judge-122nd District Court		Employer (See Instructions) Galveston County
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jeth	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Judge-122nd District Court		Employer (See Instructions) Galveston County
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jeth	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Judge-122nd District Court		Employer (See Instructions) Galveston County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 60/124 Rpt: 63/144
2 FILER NAME Galveston Republican Women - PAC				3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor Jones, Jeth	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$35.00	
	6 Contributor address; City; State; Zip Code Galveston, TX 77554			
8 Principal occupation / Job title (See Instructions) Judge-122nd District Court		9 Employer (See Instructions) Galveston County		
Date 12/24/2025	Full name of contributor Jones, Mary	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Galveston, TX 77554			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 08/04/2025	Full name of contributor Keller, Faye	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 09/24/2025	Full name of contributor Keller, Faye	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 09/26/2025	Full name of contributor Keller, Faye	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$31.00	
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/124 Rpt: 64/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Faye	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Faye	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Faye	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Faye	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Faye	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/124 Rpt: 65/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor Keller, Faye	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor Keller, Faye	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/23/2025	Full name of contributor Kelley, Lorraine	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor Kinard, Chris	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor Kinard, John	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) District Clerk		Employer (See Instructions) Galveston County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/124 Rpt: 66/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinard, John	7 Amount of Contribution (\$) \$70.00
	6 Contributor address; City; State; Zip Code League City, TX 77573	
8 Principal occupation / Job title (See Instructions) District Clerk		9 Employer (See Instructions) Galveston County
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinard, John	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) District Clerk		Employer (See Instructions) Galveston County
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirbie, Tina	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirbie, Tina	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirbie, Tina	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 64/124 Rpt: 67/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor Kirbie, Tina	6 Contributor address; City; State; Zip Code Friendswood, TX 77546	7 Amount of Contribution (\$) \$35.00
	8 Principal occupation / Job title (See Instructions) Retired		
Date 11/05/2025	Full name of contributor Kirbie, Tina	Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$125.00
	Principal occupation / Job title (See Instructions) Retired		
Date 11/05/2025	Full name of contributor Kirbie, Tina	Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$45.00
	Principal occupation / Job title (See Instructions) Retired		
Date 11/21/2025	Full name of contributor Kirbie, Tina	Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired		
Date 12/24/2025	Full name of contributor Kirbie, Tina	Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Retired		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/124 Rpt: 68/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor Kirbie, Tina	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Friendswood, TX 77546	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor Kirbie, Tina	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor Koenig, Jeannie	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor Koenig, Jeannie	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/26/2025	Full name of contributor Koenig, Jeannie	Amount of Contribution (\$) \$33.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 66/124 Rpt: 69/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koenig, Jeannie	7 Amount of Contribution (\$) \$35.00	
	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koenig, Jeannie	Amount of Contribution (\$) \$125.00	
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koenig, Jeannie	Amount of Contribution (\$) \$180.00	
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koenig, Jeannie	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koncaba, Cindy	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Friendswood, TX 77546		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/124 Rpt: 70/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koncaba, Cindy	7 Amount of Contribution (\$) \$3.00
	6 Contributor address; City; State; Zip Code Friendswood, TX 77546	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koncaba, Cindy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koncaba, Cindy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koncaba, Cindy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauer, Sarah	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Houston, TX 77062	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/124 Rpt: 71/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Stephanie 6 Contributor address; City; State; Zip Code Hitchcock, TX 77563	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Administrative Assistant		9 Employer (See Instructions) Bayou Vista
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Stephanie Contributor address; City; State; Zip Code Hitchcock, TX 77563	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Bayou Vista
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Stephanie Contributor address; City; State; Zip Code Hitchcock, TX 77563	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Bayou Vista
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Stephanie Contributor address; City; State; Zip Code Hitchcock, TX 77563	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) City of Bayou Vista
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laws, Stephanie Contributor address; City; State; Zip Code Hitchcock, TX 77563	Amount of Contribution (\$) \$74.17
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) City of Bayou Vista

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/124 Rpt: 72/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawther, Jasmine	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Tiki Island, TX 77554	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawther, Jasmine	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Tiki Island, TX 77554	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawther, Jasmine	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Tiki Island, TX 77554	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawther, Jasmine	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Tiki Island, TX 77554	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LeMay, Tina	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Tina LeMay & Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/124 Rpt: 73/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemon, Patti 6 Contributor address; City; State; Zip Code Bayou Vista , TX 77563	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions)
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemon, Patti Contributor address; City; State; Zip Code Bayou Vista , TX 77563	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions)
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemon, Patti Contributor address; City; State; Zip Code Bayou Vista , TX 77563	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemon, Patti Contributor address; City; State; Zip Code Bayou Vista , TX 77563	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leo-Wilson, Teresa Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Texas State Representative		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 71/124 Rpt: 74/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor Leo-Wilson, Teresa	<input type="checkbox"/> out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code Galveston, TX 77554	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Texas State Representative		9 Employer (See Instructions) State of Texas	
Date 11/21/2025	Full name of contributor Leo-Wilson, Teresa	<input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Texas State Representative		Employer (See Instructions) State of Texas	
Date 12/24/2025	Full name of contributor Leo-Wilson, Terri	<input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Texas State Representative		Employer (See Instructions) State of Texas	
Date 12/24/2025	Full name of contributor Leo-Wilson, Terri	<input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Texas State Representative		Employer (See Instructions) State of Texas	
Date 08/04/2025	Full name of contributor Lewis, Roxanne	<input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/124 Rpt: 75/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Roxanne	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Alvin, TX 77511	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Roxanne	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Alvin, TX 77511	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Roxanne	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Alvin, TX 77511	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Roxanne	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Alvin, TX 77511	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieblong, May Carol (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Travel Agent		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/124 Rpt: 76/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieblong, May Carol (Ms.)	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
8 Principal occupation / Job title (See Instructions) Travel Agent		9 Employer (See Instructions) Self Employed
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linton, Ron	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) The Linton Real Estate Group
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Brie	Amount of Contribution (\$) \$27.27
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) District Director		Employer (See Instructions) State Senator Mayes Middleton
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loyd, Tami	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code La Marque, TX 77568	
Principal occupation / Job title (See Instructions) Bookkeeper/Realtor		Employer (See Instructions) Self Employed
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutz, Marsha	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/124 Rpt: 77/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markarian, Gilbert	7 Amount of Contribution (\$) \$70.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77487	
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) UBC
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markarian, Gilbert	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77487	
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) UBC
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markarian, Mary Ann	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Galveston , TX 77550	
Principal occupation / Job title (See Instructions) Singer/Songwriter		Employer (See Instructions) Self Employed
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markarian, Mary Ann	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Galveston , TX 77550	
Principal occupation / Job title (See Instructions) Singer/Songwriter		Employer (See Instructions) Self Employed
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markarian, Mary Ann	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Galveston , TX 77550	
Principal occupation / Job title (See Instructions) Singer/Songwriter		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/124 Rpt: 78/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Bobby 6 Contributor address; City; State; Zip Code Hitchcock, TX 77563	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Carole Ann Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Self Employed
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Carole Ann Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Self Employed
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Carole Ann Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Self Employed
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Carole Ann Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/124 Rpt: 79/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor Mathews, Douglas 6 Contributor address; City; State; Zip Code League City, TX 77573	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor Matranga, Lisa Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Ministry		Employer (See Instructions) Psalmal The Lord Ministry
Date 11/21/2025	Full name of contributor Mattson, Bill Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor McDonald, Dawn Contributor address; City; State; Zip Code Houston, TX 77089	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) District Director		Employer (See Instructions) Dennis Paul
Date 08/04/2025	Full name of contributor McGinnis, Pat Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Humana

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/124 Rpt: 80/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGovern, Janet	7 Amount of Contribution (\$) \$37.04
	6 Contributor address; City; State; Zip Code Texas City, TX 77590	
8 Principal occupation / Job title (See Instructions) Real Estate Agent		9 Employer (See Instructions) BHG Gary Greene
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenna, Esther	Amount of Contribution (\$) \$83.94
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Editor/Business Owner		Employer (See Instructions) Pita's Italian Ice/Galveston Monthly Magazine
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeil, Sandi	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) K W Premier
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeil, Sandi	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) K W Premier
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeil, Sandi	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) K W Premier

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/124 Rpt: 81/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meeks, Barbara 6 Contributor address; City; State; Zip Code League City, TX 77573	7 Amount of Contribution (\$) \$25.00
	8 Principal occupation / Job title (See Instructions) Retired	9 Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meeks, Barbara Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Marketing	Employer (See Instructions) Self Employed
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meeks, Barbara Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Marketing	Employer (See Instructions) Self Employed
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meggelin, Nancy Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Accountant	Employer (See Instructions) Self
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meggelin, Nancy Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Accountant	Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/124 Rpt: 82/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meggelin, Nancy	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meggelin, Nancy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meindok, Dorothy	Amount of Contribution (\$) \$74.17
	Contributor address; City; State; Zip Code Dickinson, TX 77539	
Principal occupation / Job title (See Instructions) Veterans Lawyer & Advocate		Employer (See Instructions) Meindok Law
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michetich, Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code La Marque, TX 77510	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, Mayes	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77553	
Principal occupation / Job title (See Instructions) Lawyer/Texas Senator		Employer (See Instructions) Middleton Oil Company/State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/124 Rpt: 83/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/04/2025	5 Full name of contributor Millo, Rebecca	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code League City, TX 77573	
8 Principal occupation / Job title (See Instructions) District Judge		9 Employer (See Instructions) Galveston County
Date 09/23/2025	Full name of contributor Millo, Rebecca	Amount of Contribution (\$) \$59.51
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) District Judge		Employer (See Instructions) Galveston County
Date 11/05/2025	Full name of contributor Millo, Rebecca	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) District Judge		Employer (See Instructions) Galveston County
Date 12/24/2025	Full name of contributor Millo, Rebecca	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) District Judge		Employer (See Instructions) Galveston County
Date 08/04/2025	Full name of contributor Morrell, Frances	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Santa Fe, TX 77517	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/124 Rpt: 84/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrell, Frances	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Santa Fe, TX 77517	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrell, Frances	Amount of Contribution (\$) \$51.70
	Contributor address; City; State; Zip Code Santa Fe, TX 77517	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrell, Frances	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Santa Fe, TX 77517	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrell, Frances	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code Santa Fe, TX 77517	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrell, Frances	Amount of Contribution (\$) \$34.11
	Contributor address; City; State; Zip Code Santa Fe, TX 77517	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 82/124 Rpt: 85/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrell, Frances	7 Amount of Contribution (\$) \$45.00	
	6 Contributor address; City; State; Zip Code Santa Fe, TX 77517		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrell, Frances	Amount of Contribution (\$) \$70.00	
	Contributor address; City; State; Zip Code Santa Fe, TX 77517		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrell, Frances	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Santa Fe, TX 77517		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrell, Frances	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Santa Fe, TX 77517		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muehlberger, Linda	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Galveston, TX 77551		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 83/124 Rpt: 86/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor Muehlberger, Linda 6 Contributor address; City; State; Zip Code Galveston, TX 77551	7 Amount of Contribution (\$) \$35.00	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 11/05/2025	Full name of contributor Muehlberger, Linda Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$45.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 08/04/2025	Full name of contributor Mulrain, Carol Jean Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$50.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 09/24/2025	Full name of contributor Mulrain, Carol Jean Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$75.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 10/20/2025	Full name of contributor Mulrain, Carol Jean Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$75.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/124 Rpt: 87/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulrain, Carol Jean	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulrain, Carol Jean	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulrain, Carol Jean	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulrain, Carol Jean	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Jeanne	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Owner-Sapphire Sea Homes

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/124 Rpt: 88/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Jeanne	7 Amount of Contribution (\$) \$96.64
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Designer		9 Employer (See Instructions) Owner-Sapphire Sea Homes
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naschke, Mary Jo	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Public Relations		Employer (See Instructions) Self Employed
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naschke, Mary Jo	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Public Relations		Employer (See Instructions) Self Employed
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Hang(Tina)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77089	
Principal occupation / Job title (See Instructions) Hairdresser		Employer (See Instructions) Self Employed
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Hang(Tina)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Houston, TX 77089	
Principal occupation / Job title (See Instructions) Hairdresser		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/124 Rpt: 89/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor Nguyen, Hang(Tina)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Houston, TX 77089	
8 Principal occupation / Job title (See Instructions) Hairdresser		9 Employer (See Instructions) Self Employed
Date 11/20/2025	Full name of contributor Nguyen, Hang(Tina)	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Houston, TX 77089	
Principal occupation / Job title (See Instructions) Hairdresser		Employer (See Instructions) Self Employed
Date 12/24/2025	Full name of contributor Nguyen, Hang(Tina)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Houston, TX 77089	
Principal occupation / Job title (See Instructions) Hairdresser		Employer (See Instructions) Self Employed
Date 10/20/2025	Full name of contributor Nguyen, Trang(Aida)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Esthetitian		Employer (See Instructions) Owner-Ocean Wave Lash
Date 11/05/2025	Full name of contributor Nguyen, Trang(Aida)	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Esthetitian		Employer (See Instructions) Owner-Ocean Wave Lash

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/124 Rpt: 90/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor Nguyen, Trang(Aida)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77551	
8 Principal occupation / Job title (See Instructions) Esthetitian		9 Employer (See Instructions) Owner-Ocean Wave Lash
Date 09/24/2025	Full name of contributor Norwood, Marcella	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor Norwood, Marcella	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor Norwood, Marcella	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor Norwood, Marcella	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/124 Rpt: 91/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norwood, Marcella	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Friendswood, TX 77546	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nurdin, Don (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Texas City, TX 77568	
Principal occupation / Job title (See Instructions) Printing Broker		Employer (See Instructions) D. Nurdin & Associates
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nurdin, Don (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Texas City, TX 77568	
Principal occupation / Job title (See Instructions) Printing Broker		Employer (See Instructions) D. Nurdin & Associates
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nurdin, Don (Mr.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Texas City, TX 77568	
Principal occupation / Job title (See Instructions) Printing Broker		Employer (See Instructions) D. Nurdin & Associates
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Connell, Terri	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Santa Fe, TX 77510	
Principal occupation / Job title (See Instructions) Facilities Coordinator		Employer (See Instructions) Odyssey Academy

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 89/124 Rpt: 92/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Connell, Terri 6 Contributor address; City; State; Zip Code Santa Fe, TX 77510	7 Amount of Contribution (\$) \$35.00	
8 Principal occupation / Job title (See Instructions) Facilities Coordinator		9 Employer (See Instructions) Odyssey Academy	
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Connell, Terri Contributor address; City; State; Zip Code Santa Fe, TX 77510	Amount of Contribution (\$) \$22.38	
Principal occupation / Job title (See Instructions) Facilities Coordinator		Employer (See Instructions) Odyssey Academy	
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Connor, Sharon Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$83.94	
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) The O'Connor Group-Insurance	
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ott-Roth, Jennifer Contributor address; City; State; Zip Code League City, TX 77574	Amount of Contribution (\$) \$35.00	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jennifer Ott-Roth PLLC	
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ott-Roth, Jennifer Contributor address; City; State; Zip Code League City, TX 77574	Amount of Contribution (\$) \$70.00	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jennifer Ott-Roth PLLC	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/124 Rpt: 93/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/20/2025	5 Full name of contributor Ott-Roth, Jennifer	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code League City, TX 77574	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Jennifer Ott-Roth PLLC
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ott-Roth, Jennifer	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code League City, TX 77574	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jennifer Ott-Roth PLLC
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ott-Roth, Jennifer	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code League City, TX 77574	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jennifer Ott-Roth PLLC
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ott-Thompson, Linda	Amount of Contribution (\$) \$54.63
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Ott Monuments Works
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul, Dennis	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Houston, TX 77058	
Principal occupation / Job title (See Instructions) Texas State House Representative		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/124 Rpt: 94/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Ellen	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77551	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Ellen	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Ellen	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Ellen	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pizzo-Konyha, Pat	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/124 Rpt: 95/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/05/2025	5 Full name of contributor Pizzo-Konyha, Pat	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor Pizzo-Konyha, Pat	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/23/2025	Full name of contributor Pizzo-Konyha, Pat	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor Pollock, Don	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Texas City, TX 77590	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor Pollock, Don	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Texas City, TX 77590	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/124 Rpt: 96/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor Pollock, Don	7 Amount of Contribution (\$) \$70.00
	6 Contributor address; City; State; Zip Code Texas City, TX 77590	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor Pollock, Don	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Texas City, TX 77590	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor Pollock, Don	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Texas City, TX 77590	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor Pollock, Floyd	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) Self Employed
Date 09/24/2025	Full name of contributor Pollock, Sandra	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/124 Rpt: 97/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollock, Sandra	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollock, Sandra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollock, Sandra	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollock, Sandra	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollock, Sandra	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/124 Rpt: 98/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Deborah	7 Amount of Contribution (\$) \$37.04
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Realtor/Designer		9 Employer (See Instructions) Self Employed
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Deborah	Amount of Contribution (\$) \$59.51
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Realtor/Designer		Employer (See Instructions) Self Employed
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Deborah	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Realtor/Designer		Employer (See Instructions) Self Employed
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prudhomme, Eric	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Policy & Constituent Advisor for County Commissioner		Employer (See Instructions) Galveston County-Commissioner Darrell Apffel
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prudhomme, Patrick	Amount of Contribution (\$) \$111.30
	Contributor address; City; State; Zip Code Baytown, TX 77523	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/124 Rpt: 99/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quintavalle, Sharnea	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Texas City, TX 77590	
8 Principal occupation / Job title (See Instructions) Caregiver		9 Employer (See Instructions) Self Employed
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quintavalle, Sharnea	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Texas City, TX 77590	
Principal occupation / Job title (See Instructions) Caregiver		Employer (See Instructions) Self Employed
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rabon, James	Amount of Contribution (\$) \$74.17
	Contributor address; City; State; Zip Code Texas City, TX 77590	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Wanda	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Wanda	Amount of Contribution (\$) \$83.94
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 97/124 Rpt: 100/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/04/2025	5 Full name of contributor Rigsby, Jane	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563	7 Amount of Contribution (\$) \$50.00
	8 Principal occupation / Job title (See Instructions) Retired		
Date 09/24/2025	Full name of contributor Rigsby, Jane	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired		
Date 09/26/2025	Full name of contributor Rigsby, Jane	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$4.00
	Principal occupation / Job title (See Instructions) Retired		
Date 10/20/2025	Full name of contributor Rigsby, Jane	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired		
Date 11/05/2025	Full name of contributor Rigsby, Jane	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$250.00
	Principal occupation / Job title (See Instructions) Retired		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/124 Rpt: 101/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rigsby, Jane 6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563	7 Amount of Contribution (\$) \$65.00
	8 Principal occupation / Job title (See Instructions) Retired	9 Employer (See Instructions) N/A
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rigsby, Jane Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rigsby, Jane Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rigsby, Jane Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roan, Debbie Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Homemaker	Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/124 Rpt: 102/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor Robb, Marie	7 Amount of Contribution (\$) \$37.04
	6 Contributor address; City; State; Zip Code Galveston, TX 77554	
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Self Employed
Date 11/20/2025	Full name of contributor Robb, Marie	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 11/23/2025	Full name of contributor Robb, Marie	Amount of Contribution (\$) \$37.04
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 12/24/2025	Full name of contributor Robb, Marie	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor Roberts, Barbara	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/124 Rpt: 103/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Loretta 6 Contributor address; City; State; Zip Code Kemah, TX 77565	7 Amount of Contribution (\$) \$35.00
	8 Principal occupation / Job title (See Instructions) Retired	9 Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Loretta Contributor address; City; State; Zip Code Kemah, TX 77565	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Loretta Contributor address; City; State; Zip Code Kemah, TX 77565	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) San Luis Resort, Spa & Conference Ctr. Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$98.25
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Satterfield, Nancy Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/124 Rpt: 104/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Satterfield, Nancy	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77554	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Satterfield, Nancy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Satterfield, Nancy	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Satterfield, Nancy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saxe, Gregg	Amount of Contribution (\$) \$54.63
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 102/124 Rpt: 105/144
2 FILER NAME Galveston Republican Women - PAC				3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwertner, Pam	7 Amount of Contribution (\$) \$35.00		
	6 Contributor address; City; State; Zip Code Santa Fe, TX 77517			
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Self Employed		
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwertner, Pam	Amount of Contribution (\$) \$35.00		
	Contributor address; City; State; Zip Code Santa Fe, TX 77517			
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed		
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwertner, Pam	Amount of Contribution (\$) \$35.00		
	Contributor address; City; State; Zip Code Santa Fe, TX 77517			
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed		
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sears, Joyce	Amount of Contribution (\$) \$25.00		
	Contributor address; City; State; Zip Code Dickinson , TX 77539			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sears, Joyce	Amount of Contribution (\$) \$35.00		
	Contributor address; City; State; Zip Code Dickinson , TX 77539			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/124 Rpt: 106/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/05/2025	5 Full name of contributor Sears, Joyce	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Dickinson , TX 77539	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor Sears, Joyce	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Dickinson , TX 77539	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor Sears, Joyce	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Dickinson , TX 77539	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor Sears, Joyce	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Dickinson , TX 77539	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor Sears, Joyce	Amount of Contribution (\$) \$46.00
	Contributor address; City; State; Zip Code Dickinson , TX 77539	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 104/124 Rpt: 107/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor Sears, Joyce	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Dickinson , TX 77539		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 09/24/2025	Full name of contributor Siewers, Jon	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Kemah, TX 77565		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 10/20/2025	Full name of contributor Siewers, Renne	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Kemah, TX 77565		
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self Employed	
Date 11/05/2025	Full name of contributor Siewers, Renne	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Kemah, TX 77565		
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self Employed	
Date 12/08/2025	Full name of contributor Siewers, Renne	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Kemah, TX 77565		
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self Employed	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/124 Rpt: 108/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Linda	7 Amount of Contribution (\$) \$37.04
	6 Contributor address; City; State; Zip Code Houston, TX 77089	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Linda	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77089	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Linda	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Houston, TX 77089	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Linda	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Houston, TX 77089	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slaughter, Michelle	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code League City, TX 77574	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Johnson & Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			<p>1 Total pages Schedule A1: Sch: 106/124 Rpt: 109/144</p>
<p>2 FILER NAME Galveston Republican Women - PAC</p>			<p>3 Filer ID (Ethics Commission Filers) 00054591</p>
<p>4 Date 12/24/2025</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slaughter, Michelle</p>	<p>6 Contributor address; City; State; Zip Code League City, TX 77574</p>	<p>7 Amount of Contribution (\$) \$70.00</p>
<p>8 Principal occupation / Job title (See Instructions) Attorney</p>		<p>9 Employer (See Instructions) Johnson & Associates</p>	
<p>Date 09/23/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speights, Shannon</p>	<p>Contributor address; City; State; Zip Code Galveston , TX 77550</p>	<p>Amount of Contribution (\$) \$83.85</p>
<p>Principal occupation / Job title (See Instructions) Coordinator II-Dept. of Psychiatry</p>		<p>Employer (See Instructions) UTMB</p>	
<p>Date 10/20/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanford, Barbara</p>	<p>Contributor address; City; State; Zip Code League City, TX 77573</p>	<p>Amount of Contribution (\$) \$35.00</p>
<p>Principal occupation / Job title (See Instructions) Retired</p>		<p>Employer (See Instructions) N/A</p>	
<p>Date 11/21/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanford, Barbara</p>	<p>Contributor address; City; State; Zip Code League City, TX 77573</p>	<p>Amount of Contribution (\$) \$30.00</p>
<p>Principal occupation / Job title (See Instructions) Retired</p>		<p>Employer (See Instructions) N/A</p>	
<p>Date 11/21/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanford, Barbara</p>	<p>Contributor address; City; State; Zip Code League City, TX 77573</p>	<p>Amount of Contribution (\$) \$5.00</p>
<p>Principal occupation / Job title (See Instructions) Retired</p>		<p>Employer (See Instructions) N/A</p>	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/124 Rpt: 110/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor Stanford, Barbara	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code League City, TX 77573	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor Sullivan, Cindy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor Swanson, Marilyn	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swanson Health Insurance
Date 11/20/2025	Full name of contributor Swanson, Marilyn	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swanson Health Insurance
Date 11/21/2025	Full name of contributor Swanson, Marilyn	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swanson Health Insurance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/124 Rpt: 111/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Marilyn 6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Swanson Health Insurance
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Marilyn Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swanson Health Insurance
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Martie Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Martie Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Martie Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/124 Rpt: 112/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Martie 6 Contributor address; City; State; Zip Code Galveston, TX 77554	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Self Employed
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Martie Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Martie Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Martie Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Martie Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 110/124 Rpt: 113/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor Thomas, Ann	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$70.00
	6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 11/05/2025	Full name of contributor Thomas, Ann	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 08/04/2025	Full name of contributor Tichelaar, Suzanne	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Galveston, TX 77551		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 09/24/2025	Full name of contributor Tichelaar, Suzanne	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77551		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/05/2025	Full name of contributor Tichelaar, Suzanne	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Galveston, TX 77551		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/124 Rpt: 114/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timm, Asta 6 Contributor address; City; State; Zip Code Galveston, TX 77550	7 Amount of Contribution (\$) \$27.27
	8 Principal occupation / Job title (See Instructions) Retired	9 Employer (See Instructions) N/A
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timm, Asta Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$120.98
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timm, Asta Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$46.81
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timm, Asta Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$37.04
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timm, Asta Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$125.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 112/124 Rpt: 115/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/23/2025	5 Full name of contributor Timm, Asta	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$37.04
	6 Contributor address; City; State; Zip Code Galveston, TX 77550		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
Date 12/23/2025	Full name of contributor Tocco, Dena		<input type="checkbox"/> out-of-state PAC (ID#: _____) \$37.04
	Contributor address; City; State; Zip Code Pearland, TX 77581		
Principal occupation / Job title (See Instructions) District Director		Employer (See Instructions) State Representative Terri Leo-Wilson	
Date 11/05/2025	Full name of contributor Troop, Dianne		<input type="checkbox"/> out-of-state PAC (ID#: _____) \$80.00
	Contributor address; City; State; Zip Code League City, TX 77573		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/23/2025	Full name of contributor Troop, Dianne		<input type="checkbox"/> out-of-state PAC (ID#: _____) \$37.04
	Contributor address; City; State; Zip Code League City, TX 77573		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/23/2025	Full name of contributor Troop, Dianne		<input type="checkbox"/> out-of-state PAC (ID#: _____) \$37.04
	Contributor address; City; State; Zip Code League City, TX 77573		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/124 Rpt: 116/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troop, Dianne	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code League City, TX 77573	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Dorothy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Dorothy	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Dorothy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Dorothy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/124 Rpt: 117/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Visage, Toni	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Galveston , TX 77551	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Visage, Toni	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston , TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Visage, Toni	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston , TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Visage, Toni	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Galveston , TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Visage, Toni	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Galveston , TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/124 Rpt: 118/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Visage, Toni 6 Contributor address; City; State; Zip Code Galveston , TX 77551	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walpole, Herb Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Century Millwork
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walpole, Levinda Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Memorial Herman Healthcare System
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walpole, Levinda Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Memorial Herman Healthcare System
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walpole, Levinda Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Memorial Herman Healthcare System

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/124 Rpt: 119/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walpole, Levinda	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Administration		9 Employer (See Instructions) Memorial Herman Healthcare System
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walpole, Levinda	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Memorial Herman Healthcare System
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walpole, Levinda	Amount of Contribution (\$) \$105.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Memorial Herman Healthcare System
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walpole, Levinda	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Memorial Herman Healthcare System
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walpole, Levinda	Amount of Contribution (\$) \$105.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Memorial Herman Healthcare System

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/124 Rpt: 120/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wander, Beverly	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77553	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Self
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wander, Beverly	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77553	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wander, Beverly	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Galveston, TX 77553	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wander, Beverly	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77553	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wander, Cynthia	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77553	
Principal occupation / Job title (See Instructions) Does not want to reveal		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/124 Rpt: 121/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wander, Cynthia	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77553	
8 Principal occupation / Job title (See Instructions) Does not want to reveal		9 Employer (See Instructions) Self
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wander, Cynthia	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Galveston, TX 77553	
Principal occupation / Job title (See Instructions) Does not want to reveal		Employer (See Instructions) Self
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wander, Cynthia	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77553	
Principal occupation / Job title (See Instructions) Does not want to reveal		Employer (See Instructions) Self Employed
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Lynda	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Lynda	Amount of Contribution (\$) \$41.93
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/124 Rpt: 122/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Lynda	7 Amount of Contribution (\$) \$37.04
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Lynda	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Yolanda	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Texas City, TX 77568	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Sew Unique Quilting & Fabrics
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Nathan	Amount of Contribution (\$) \$74.17
	Contributor address; City; State; Zip Code Baytown, TX 77523	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Americas Holding
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Nathan	Amount of Contribution (\$) \$55.00
	Contributor address; City; State; Zip Code Baytown, TX 77523	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Americas Holding

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 120/124 Rpt: 123/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/21/2025	5 Full name of contributor Watson, Barbara	6 Contributor address; City; State; Zip Code Friendswood, TX 77546	7 Amount of Contribution (\$) \$35.00
	8 Principal occupation / Job title (See Instructions) Retired		
Date 12/24/2025	Full name of contributor Watson, Barbara	Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$17.00
	Principal occupation / Job title (See Instructions) Retired		
Date 09/24/2025	Full name of contributor Watters, Joan	Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired		
Date 10/20/2025	Full name of contributor Watters, Joan	Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired		
Date 12/24/2025	Full name of contributor Watts, Jeana	Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Designer/Professional Organizer		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/124 Rpt: 124/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Jeana	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77551	
8 Principal occupation / Job title (See Instructions) Designer/Professional Organizer		9 Employer (See Instructions) Closets By Design
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Brenda	Amount of Contribution (\$) \$46.81
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Brenda	Amount of Contribution (\$) \$22.38
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Randy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) U.S. Representative to Congress		Employer (See Instructions) U.S.Government
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Randy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) U.S. Representative to Congress		Employer (See Instructions) U.S.Government

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 122/124 Rpt: 125/144
2 FILER NAME Galveston Republican Women - PAC			3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Randy 6 Contributor address; City; State; Zip Code Friendswood, TX 77546	7 Amount of Contribution (\$) \$105.00	
8 Principal occupation / Job title (See Instructions) U.S. Representative to Congress		9 Employer (See Instructions) U.S.Government	
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittaker, Malcolm Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$35.00	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed	
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson-Day, Kristen Contributor address; City; State; Zip Code Dickenson, TX 77539	Amount of Contribution (\$) \$25.00	
Principal occupation / Job title (See Instructions) Firearms Trainer		Employer (See Instructions) Self Employed	
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winkelmann, Ann Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$35.00	
Principal occupation / Job title (See Instructions) Oil & Gas		Employer (See Instructions) Self	
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winkelmann, Ann Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$70.00	
Principal occupation / Job title (See Instructions) Oil & Gas		Employer (See Instructions) Self	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/124 Rpt: 126/144
2 FILER NAME Galveston Republican Women - PAC		3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womack, Wallie	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Houston, TX 77057	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womak, Wallie	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Houston, TX 77057	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Georgia	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Georgia	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Georgia	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			<p>1 Total pages Schedule A1: Sch: 124/124 Rpt: 127/144</p>
<p>2 FILER NAME Galveston Republican Women - PAC</p>			<p>3 Filer ID (Ethics Commission Filers) 00054591</p>
<p>4 Date 12/24/2025</p>	<p>5 Full name of contributor Young, Georgia</p> <p>6 Contributor address; City; State; Zip Code Friendswood, TX 77546</p>	<p>7 Amount of Contribution (\$) \$15.00</p>	
<p>8 Principal occupation / Job title (See Instructions) Retired</p>		<p>9 Employer (See Instructions) N/A</p>	
<p>Date 12/24/2025</p>	<p>Full name of contributor Young, Georgia</p> <p>Contributor address; City; State; Zip Code Friendswood, TX 77546</p>	<p>Amount of Contribution (\$) \$35.00</p>	
<p>Principal occupation / Job title (See Instructions) Retired</p>		<p>Employer (See Instructions) N/A</p>	

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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/17/2025	5 Payee name Texas Capitol Gift Shop	
6 Amount (\$) \$107.00	7 Payee address; City; State; Zip Code 1201 San Jacinto Blvd. Austin, TX 78701	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2899-Gift for Sandra & Floyd Pollock for hosting the GRW Board Meetings for 2 years
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/25/2025	Payee name Adria Women's Health	
Amount (\$) \$800.00	Payee address; City; State; Zip Code 10000 Emmett F Lowry Expressway Texas City, TX 77591	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Community Outreach	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2885-Purchased table at Fundraiser. To be reimbursed by participants at the table.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/01/2025	Payee name Amazon	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 410 Terry Ave. N Seattle, WA 98109	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2874-Decoration for the GRW 70th Anniversary Dinner/Fundraiser
Complete ONLY 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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/17/2025	5 Payee name Big Brothers Big Sisters Gulf Coast	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 1021 61st Street-Suite A600 Galveston, TX 77551	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2898- Organization selected for the GRW Charitable Donation for 2025.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/01/2025	Payee name Broussard, Janice (Ms.)	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 4016 Cartagena Dr Pearlalnd, TX 77581	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2876-Reimbursement for Fundraiser income. Should have gone to Ms. Broussard She bought a
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/04/2025	Payee name Broussard, Janice (Ms.)	
Amount (\$) \$20.00	Payee address; City; State; Zip Code 4016 Cartagena Dr Pearlalnd, TX 77581	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2892- Reimbursement of valet tips to carry decorations in and out of the event venue
Complete ONLY 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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/31/2025	5 Payee name Broussard, Janice (Ms.)	
6 Amount (\$) \$40.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Pearlalnd, TX 77581	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2902- Valet service to unload decorations for the Nov. & Dec. Meetings/Luncheons.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name Comptroller of Public Accounts	
Amount (\$) \$238.34	Payee address; City; State; Zip Code P O Box 149355 <input type="checkbox"/> Expenditure from corporate funds Austin, TX 78714-9355	
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 Ck#2904-2025 Sales Tax
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/01/2025	Payee name Constant Contact	
Amount (\$) \$79.95	Payee address; City; State; Zip Code 1601 Trapelo Road <input type="checkbox"/> Expenditure from corporate funds Waltham, MA 02451	
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 Ck#2873- 3 Months of Fees to cover email service to Members
Complete ONLY 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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591
4 Date 10/06/2025	5 Payee name Constant Contact	
6 Amount (\$) \$83.16	7 Payee address; City; 1601 Trapelo Road Waltham, MA 02451	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Email hosting services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2887- Email hosting services for 3 months-June, July & August
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/17/2025	Payee name Constant Contact	
Amount (\$) \$83.16	Payee address; City; 1601 Trapelo Road Waltham, MA 02451	
<input type="checkbox"/> Expenditure from corporate funds	(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 Ck#2899- 3 months of fees for email services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/30/2025	Payee name Demack, Alexandra	
Amount (\$) \$160.00	Payee address; City; 17 Campeche Drive Galveston, TX 77554	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2878-Security for the GRW Summertime Social Mixer
Complete ONLY 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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/30/2025	5 Payee name Duty, Cynthia	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 931 Bonita Bayou Vista, TX 77563	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Attendance at TFRW Convention	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2886-Expense for attending the 2025TFRW Convention offset by a donation to the Club.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name Fast Signs	
Amount (\$) \$21.74	Payee address; City; State; Zip Code 1021 61st Street-Suite 600B Galveston, TX 77551	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Name Badges	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2889-Member name badge expenses. Reimbursed by Member.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/17/2025	Payee name Fast Signs	
Amount (\$) \$21.11	Payee address; City; State; Zip Code 1021 61st Street-Suite 600B Galveston, TX 77551	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Name Badges	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2882-Member Name Badges
Complete ONLY 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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/19/2025	5 Payee name Fast Signs	
6 Amount (\$) \$42.22	7 Payee address; City; State; Zip Code 1021 61st Street-Suite 600B Galveston, TX 77551	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Member Badges	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2893-6 GRW Member Badges
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/17/2025	Payee name Fast Signs	
Amount (\$) \$42.22	Payee address; City; State; Zip Code 1021 61st Street-Suite 600B Galveston, TX 77551	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Member Badges	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2900-Member Badges
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/01/2025	Payee name HEB	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 701 W. Parkwood Ave. Friendswood, TX 77546	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2873-Gift Card to volunteer, Adana Haynes, for completing our 2024 Audit.
Complete ONLY 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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/04/2025	5 Payee name Hobby Lobby-Pearland	
6 Amount (\$) \$16.47	7 Payee address; City; 2450 Pearland Parkway Pearland, TX 77581	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2892-Decorations for Tables at our October Meeting/Luncheon
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name Hobby Lobby-Pearland	
Amount (\$) \$75.01	Payee address; City; 2450 Pearland Parkway Pearland, TX 77581	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2902-Decorations for the December Meeting/Luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Hobby Lobby-Webster	
Amount (\$) \$12.93	Payee address; City; 20091 Gulf Freeway Webster, TX 77598	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2887-Mixer supplies-Name Tags & Markers
Complete ONLY 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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/19/2025	5 Payee name Hobby Lobby-Webster	
6 Amount (\$) \$36.77	7 Payee address; City; 20091 Gulf Freeway Webster, TX 77598	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2894- Table Decorations for November Mtg./Luncheon
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought
Date 07/30/2025	Payee name Johnstone, Cole	Office held Office held
Amount (\$) \$50.00	Payee address; City; 691 Warsaw Bayou Vista, TX 77563	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2877- Payment for setting Up/Tearing Down tables & chairs at the GRW Summertime Social
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought
Date 07/01/2025	Payee name Kroger-Galveston Seawall	Office held Office held
Amount (\$) \$9.98	Payee address; City; 5730 Seawall Blvd. Galveston, TX 77551	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation to the Galveston Police Dept. event	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2875-Water for the event " Feeding the Force."
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought

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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591
4 Date 07/30/2025	5 Payee name Kroger-Galveston Seawall	
6 Amount (\$) \$72.50	7 Payee address; City; 5730 Seawall Blvd. Galveston, TX 77551	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2878-Beer for GRW Summertime Social Mixer
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/01/2025	Payee name Pair Domain	
Amount (\$) \$195.36	Payee address; City; 2403 Sidney St.-Suite 210 Pittsburgh, PA 15203	
<input type="checkbox"/> Expenditure from corporate funds	(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 Ck#2873-Annual Fee for GRW Domain Name
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/01/2025	Payee name Pair Networks	
Amount (\$) \$25.64	Payee address; City; 2403 Sidney St.-Suite210 Pittsburgh, PA 15203	
<input type="checkbox"/> Expenditure from corporate funds	(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 Ck#2873- Annual fee for hosting the GRW Website
Complete ONLY 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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591	
4 Date 11/19/2025	5 Payee name Saltwater Garden Club		
6 Amount (\$) \$50.00	7 Payee address; City; 435 Pompano Street Bayou Vista, TX 77563	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2895- Booth selling GRW merchandise	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/04/2025	Payee name Sam's Club-Friendswood		
Amount (\$) \$128.79	Payee address; City; 155 W. El Dorado Blvd. Friendswood, TX 77546	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2892-Flowers for the tables at our September Meeting/Luncheon	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/04/2025	Payee name Sam's Club-Friendswood		
Amount (\$) \$70.06	Payee address; City; 155 W. El Dorado Blvd. Friendswood, TX 77546	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2892-Flowers for the tables at our September Meeting/Luncheon	
Complete ONLY 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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/31/2025	5 Payee name Sam's Club-Friendswood	
6 Amount (\$) \$140.23	7 Payee address; City; 155 W. El Dorado Blvd. Friendswood, TX 77546	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2902-Decorations for the December Meeting/Luncheon
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/01/2025	Payee name Sam's Club	
Amount (\$) \$109.58	Payee address; City; 6614 Gulf Freeway La Marque, TX 77568	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Donation to the Galveston Police Dept.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2875-Water & Gatorade for the event " Feeding the Force."
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/31/2025	Payee name San Luis Resort, Spa & Conference Ctr.	
Amount (\$) \$4,319.18	Payee address; City; 5222 Seawall Blvd Galveston, TX 77551	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2890-October Meeting/Luncheon
Complete ONLY 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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591
4 Date 09/24/2025	5 Payee name San Luis Resort, Spa & Conference Ctr.	
6 Amount (\$) \$3,095.96	7 Payee address; City; State; Zip Code 5222 Seawall Blvd Galveston, TX 77551	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2884-September Meeting/Luncheon
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/30/2025	Payee name San Luis Resort, Spa & Conference Ctr.	
Amount (\$) \$3,572.17	Payee address; City; State; Zip Code 5222 Seawall Blvd Galveston, TX 77551	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2897-November Meeting/Luncheon expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name San Luis Resort, Spa & Conference Ctr.	
Amount (\$) \$4,265.06	Payee address; City; State; Zip Code 5222 Seawall Blvd Galveston, TX 77551	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2903-December Mtg./Luncheon banquet.
Complete ONLY 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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591	
4 Date 08/18/2025	5 Payee name Sant Fe Soap Factory		
6 Amount (\$) \$200.00	7 Payee address; City; 4809 Ave. L Santa Fe, TX 77510	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense		
PURPOSE OF EXPENDITURE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2879- Soap to sell to Members for gifts for Christmas, Birthdays, etc.		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/15/2025	Payee name Santa Fe Chamber of Commerce		
Amount (\$) \$3,750.00	Payee address; City; 12121 FM 1764 Santa Fe, TX 77510	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense		
PURPOSE OF EXPENDITURE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2888-Event supporting mammography van going to underserved communities. To be		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/19/2025	Payee name Santa Fe ISD		
Amount (\$) \$70.75	Payee address; City; 4133 Warpath Santa Fe , TX 77510	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Printing Expense		
PURPOSE OF EXPENDITURE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2883- Copies of Membership Forms		
Complete ONLY 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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591
4 Date 08/18/2025	5 Payee name Santa Fe Soap Factory	
6 Amount (\$) \$205.94	7 Payee address; City; 4809 Avenue L Santa Fe, TX 77510	
<input type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2880-Soap to sell to Members for Birthday, Christmas , etc. gifts
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/18/2025	Payee name Scribbles	
Amount (\$) \$211.09	Payee address; City; 2825 Palmer Hwy. Texas City, TX 77590	
<input type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2879-Sample shirts to sell Members at our Sept., October and November luncheons
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/04/2025	Payee name Scribbles	
Amount (\$) \$63.87	Payee address; City; 2825 Palmer Hwy. Texas City, TX 77590	
<input type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2891-Purchase of GRW Logo Shirts to sell to Members at our November Meeting/Luncheon
Complete ONLY 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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591
4 Date 11/04/2025	5 Payee name Scribbles	
6 Amount (\$) \$231.11	7 Payee address; City; State; Zip Code 2825 Palmer Hwy. Texas City, TX 77590	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Check#2891-Purchase of GRW Shirts that were sold at our October Meeting/Luncheon
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Staples	
Amount (\$) \$18.93	Payee address; City; State; Zip Code 19335 Gulf Freeway Webster, TX 77598	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2887-Prize drawing Tickets for Luncheon/Meeting and other events
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/30/2025	Payee name TFRW	
Amount (\$) \$1,820.00	Payee address; City; State; Zip Code P O Box 171146 Austin, TX 78717-0041	
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 Ck#2896-November monthly fee for New and Renewing GRW Members
Complete ONLY 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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591
4 Date 12/31/2025	5 Payee name TFRW	
6 Amount (\$) \$425.00	7 Payee address; City; State; Zip Code P O Box 171146 Austin, TX 78717-0041	
<input type="checkbox"/> Expenditure from corporate funds	(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 Ck#2901-Monthy fees for New and Renewing Members
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/19/2025	Payee name Total Wine & More	
Amount (\$) \$42.74	Payee address; City; State; Zip Code 18740 Gulf Freeway Friendswood, TX 77546	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2894-Gift for Speaker
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/22/2025	Payee name Treasure Island Trophies & Engraving	
Amount (\$) \$110.40	Payee address; City; State; Zip Code 4528 Ave. S Galveston, TX 77551	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2881-2024 Woman of Distinction award
Complete ONLY 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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/17 Rpt:	2 FILER NAME Galveston Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00054591	
4 Date 11/19/2025	5 Payee name White House Historical Association		
6 Amount (\$) \$27.01	7 Payee address; City; State; Zip Code P O Box 27624 Washington DC, TX 20038		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ck#2895-Gift for in-coming GRW Preident	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held