

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) 00085254	2 Total pages filed: 57
3 COMMITTEE NAME Southeast Texas Republican Women			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/05/2026 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 1071 Nederland, TX 77627		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Elizabeth NICKNAME LAST SUFFIX Esthay		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3112 Youmans Dr. Nederland, TX 77627		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3112 Youmans Dr. Nederland, TX 77627		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (409) 651-3018		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year 07/01/2025 THROUGH Month Day Year 12/31/2025		
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Southeast Texas Republican Women	13 Filer ID (Ethics Commission Filers) 00085254
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 32,697.35
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 18,850.22
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 20,484.02
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Ms. Elizabeth Esthay

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 57

17 COMMITTEE NAME Southeast Texas Republican Women		18 Filer ID (Ethics Commission Filers) 00085254
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 32,697.35
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	\$ 18,850.22
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 188.00
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: 1/39 Rpt: 4/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aldredge, Alan (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Lumberton, TX 77857	7 Amount of Contribution (\$) \$26.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aldredge, Kimberly (Ms.) <hr/> Contributor address; City; State; Zip Code Lumberton, TX 77657	Amount of Contribution (\$) \$26.50
Principal occupation / Job title (See Instructions) Hair Stylist		Employer (See Instructions)
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashby, Trent (Mr.) <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75901	Amount of Contribution (\$) \$26.50
Principal occupation / Job title (See Instructions) TX State Rep		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashrafi, Mahmoona (Tahir) (Mr.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) Commerical Realtor		Employer (See Instructions) Self
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckcom, Doneane (Ms.) <hr/> Contributor address; City; State; Zip Code Port Athur, TX 77642	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Lawyer / PA City Council		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/39 Rpt: 5/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckcom, Doneane (Ms.) 6 Contributor address; City; State; Zip Code Port Arthur, TX 77642	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordelon, Elizabeth (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordelon, Elizabeth (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordelon, Elizabeth (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordelon, Elizabeth (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/39 Rpt: 6/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordelon, Elizabeth (Ms.) 6 Contributor address; City; State; Zip Code Beaumont, TX 77706	7 Amount of Contribution (\$) \$65.00
8 Principal occupation / Job title (See Instructions) Parts Tech		9 Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Branick, Jeff (Mr.) Contributor address; City; State; Zip Code Pt. Neches, TX 77251	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Jefferson County Judge		Employer (See Instructions) Jefferson County
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Branick, Jeff (Mr.) Contributor address; City; State; Zip Code Pt. Neches, TX 77251	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Jefferson County Judge		Employer (See Instructions) Jefferson County
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Branick, Jeff (Ms.) Contributor address; City; State; Zip Code Pt. Neches, TX 77251	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Jefferson County Judge		Employer (See Instructions) Jefferson County
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Branick, Jeff (Ms.) Contributor address; City; State; Zip Code Pt. Neches, TX 77251	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Jefferson County Judge		Employer (See Instructions) Jefferson County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/39 Rpt: 7/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Autumn (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$36.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Autumn (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Autumn (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Janet (Ms.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Regional Casework Dir.		Employer (See Instructions)
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Janet (Ms.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Regional Casework Dir.		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/39 Rpt: 8/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Janet (Ms.) 6 Contributor address; City; State; Zip Code Pt. Neches, TX 77651	7 Amount of Contribution (\$) \$36.50
8 Principal occupation / Job title (See Instructions) Regional Casework Dir.		9 Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Janet (Ms.) Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Regional Casework Dir.		Employer (See Instructions)
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnett, Brad (Mr.) Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$26.50
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions)
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnett, Teresa (Ms.) Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) Housewife		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Dina (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$109.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/39 Rpt: 9/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 09/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Dina (Ms.) 6 Contributor address; City; State; Zip Code Beaumont, TX 77705	7 Amount of Contribution (\$) \$36.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Dina (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Dina (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Dina (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Dina (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/39 Rpt: 10/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Dina (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77705	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Kate (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77713	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions)
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Kate (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77713	Amount of Contribution (\$) \$26.50
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions)
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Kate (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77713	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cates, Norma (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/39 Rpt: 11/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cates, Norma (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cates, Norma (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cates, Norma (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cates, Norma (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortez, Becky (Ms.) <hr/> Contributor address; City; State; Zip Code Port Neches, TX 77651	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/39 Rpt: 12/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortez, Becky (Ms.) 6 Contributor address; City; State; Zip Code Port Neches, TX 77651	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) self employed		9 Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortez, Becky (Ms.) Contributor address; City; State; Zip Code Port Neches, TX 77651	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortez, Becky (Ms.) Contributor address; City; State; Zip Code Port Neches, TX 77651	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courville, Barbara (Mrs.) Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covey, Lydia (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Rhonda Ward Campaign Worker		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/39 Rpt: 13/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covey, Lydia (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$36.50
8 Principal occupation / Job title (See Instructions) Rhonda Ward Campaign Worker		9 Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covey, Lydia (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Rhonda Ward Campaign Worker		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curl, Dotti (Ms.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curl, Dotti (Ms.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curl, Dotti (Ms.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/39 Rpt: 14/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curl, Dotti (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Pt. Neches, TX 77651	7 Amount of Contribution (\$) \$73.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curl, Dotti (Ms.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curl, Dotti (Ms.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darby, Jeff (Mr.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebeling, Jeanene (Ms.) <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77640	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/39 Rpt: 15/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebeling, Jeanene (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Port Arthur, TX 77640	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Bookkeeper		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebeling, Jeanene (Ms.) <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77640	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebeling, Jeanene (Ms.) <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77640	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebeling, Jeanene (Ms.) <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77640	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Betty (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/39 Rpt: 16/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Betty (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Betty (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Betty (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Betty (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Cary (Mr.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Jefferson County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/39 Rpt: 17/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 09/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Cary (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$36.50
8 Principal occupation / Job title (See Instructions) County Commissioner		9 Employer (See Instructions) Jefferson County
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Cary (Mr.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Jefferson County
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Cary (Mr.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Jefferson County
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esthay, Beth (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Accounting Clerk		Employer (See Instructions)
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esthay, Elizabeth (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/39 Rpt: 18/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esthay, Elizabeth (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$36.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)

Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esthay, Elizabeth (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esthay, Elizabeth (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esthay, Elizabeth (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esthay, Elizabeth (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/39 Rpt: 19/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esthay, Elizabeth (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esthay, Elizabeth (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esthay, Elizabeth (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esthay, Elizabeth (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Joe (Mr.) <hr/> Contributor address; City; State; Zip Code Beaumont , TX 77706	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/39 Rpt: 20/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Joe (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Beaumont , TX 77706	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Program Manager		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figari, Stephanie (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forey, Hope (Ms.) <hr/> Contributor address; City; State; Zip Code NEDERLAND, TX 77627	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freisz, Gordon (Judge) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) District Judge		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friesz, Gordan (Mr.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/39 Rpt: 21/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillispie, Kurt (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Groves, TX 77619	7 Amount of Contribution (\$) \$73.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions)
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goleman, Scott (Mr.) <hr/> Contributor address; City; State; Zip Code Cut and Shoot, TX 77306	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Chief Justice		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/39 Rpt: 22/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77705	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)

Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/39 Rpt: 23/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Pat (Ms.) 6 Contributor address; City; State; Zip Code Beaumont, TX 77705	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ann (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ann (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ann (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ann (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/39 Rpt: 24/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ann (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ann (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ann (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammonds, James (Mr.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Jennifer (Ms.) <hr/> Contributor address; City; State; Zip Code Lumberton, TX 77657	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Staff		Employer (See Instructions) Senator Robert Nichols

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/39 Rpt: 25/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Jennifer (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Lumberton, TX 77657	7 Amount of Contribution (\$) \$36.50
8 Principal occupation / Job title (See Instructions) Staff		9 Employer (See Instructions) Senator Robert Nichols
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Jennifer (Ms.) <hr/> Contributor address; City; State; Zip Code Lumberton, TX 77657	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Staff		Employer (See Instructions) Senator Robert Nichols
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Elaine (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77726	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollier, Emmett (Mr.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Oil Field Consultant		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollier, Emmett (Mr.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Oil Field Consultant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/39 Rpt: 26/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollier, Emmett (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Oil Field Consultant		9 Employer (See Instructions)
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JCRP <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$21,984.35
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JCRP <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$1,800.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Stephanie (Ms.) <hr/> Contributor address; City; State; Zip Code Pott Arthur, TX 77642	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Intake Specialist Legacy.c.d.c		Employer (See Instructions)
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Kimberly (Mrs.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$26.50
Principal occupation / Job title (See Instructions) Marketin Mgr.		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/39 Rpt: 27/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lejeune, David (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Port Arthur, TX 77642	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) FFB Mid County Market President		9 Employer (See Instructions)
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lively, Angelia (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Low, Heather (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) Envir. Specialist		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacKenzie, Liz (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacKenzie, Liz (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/39 Rpt: 28/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacKenzie, Liz (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77707	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mackenzie, Liz (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maggio, Marie (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maggio, Marie (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maggio, Marie (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/39 Rpt: 29/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maggio, Marie (Ms.) 6 Contributor address; City; State; Zip Code Beaumont, TX 77706	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maggio, Marie (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Sharon (Ms.) Contributor address; City; State; Zip Code Las Vegas, NV 89139	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Tax Consultant		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markland, Bryan (Mr.) Contributor address; City; State; Zip Code Beaumont, TX 77713	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) Candidate for County Commissioner		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markland, Bryan (Mr.) Contributor address; City; State; Zip Code Beaumont, TX 77713	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Candidate for County Commissioner		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/39 Rpt: 30/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Maggie (Ms.) 6 Contributor address; City; State; Zip Code Port Neches, TX 77651	7 Amount of Contribution (\$) \$36.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayes, Pat (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayes, Pat (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayes, Pat (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayes, Pat (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/39 Rpt: 31/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayes, Pat (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77706	7 Amount of Contribution (\$) \$36.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Charles (Mr.) <hr/> Contributor address; City; State; Zip Code Willis, TX 77678	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) TX Senate Candidate		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Danny (Mr.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Danny (Mr.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Danny (Mr.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/39 Rpt: 32/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Danny (Mr.) 6 Contributor address; City; State; Zip Code Pt. Neches, TX 77651	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Luke (Mr.) Contributor address; City; State; Zip Code Beaumont, TX 77701	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Luke (Mr.) Contributor address; City; State; Zip Code Beaumont, TX 77701	Amount of Contribution (\$) \$26.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Luke (Mr.) Contributor address; City; State; Zip Code Beaumont, TX 77701	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacetti, Rodney (Mr.) Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/39 Rpt: 33/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 09/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacetti, Rodney (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Groves, TX 77619	7 Amount of Contribution (\$) \$73.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacetti, Rodney (Mr.) <hr/> Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacetti, Rodney (Mr.) <hr/> Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Platts, Shilo (Mr.) <hr/> Contributor address; City; State; Zip Code China, TX 77613	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Candidate Jeff Co Republican chair		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Platts, Shilo (Mr.) <hr/> Contributor address; City; State; Zip Code China, TX 77613	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Candidate Jeff Co Republican Chair		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/39 Rpt: 34/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Nancy (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Groves, TX 77619	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Nancy (Ms.) <hr/> Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Nancy (Ms.) <hr/> Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Nancy (Ms.) <hr/> Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Nancy (Ms.) <hr/> Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/39 Rpt: 35/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ransonette, Charlotte (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Pt. Arthur, TX 77642	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ransonette, Charlotte (Ms.) <hr/> Contributor address; City; State; Zip Code Pt. Arthur, TX 77642	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ransonette, Charlotte (Ms.) <hr/> Contributor address; City; State; Zip Code Pt. Arthur, TX 77642	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ransonette, Charlotte (Ms.) <hr/> Contributor address; City; State; Zip Code Pt. Arthur, TX 77642	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Read, Lanora (Ms.) <hr/> Contributor address; City; State; Zip Code Port Neches, TX 77651	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/39 Rpt: 36/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reid, Sherrie (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Bridge City , TX 77611	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Anna (Ms.) <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77642	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Anna (Ms.) <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77642	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions)
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Anna (Ms.) <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77642	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions)
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Kittie (Ms.) <hr/> Contributor address; City; State; Zip Code Hamshire, TX 77622	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/39 Rpt: 37/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seiler, Kenna (Mr.) <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77382	7 Amount of Contribution (\$) \$26.50
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siragusa, Dora (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siragusa, Dora (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siragusa, Dora (Ms.) <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Julia (Ms.) <hr/> Contributor address; City; State; Zip Code Pt. Neches, TX 77651	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/39 Rpt: 38/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sandra (Ms.) 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$105.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sandra (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sandra (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sandra (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sandra (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/39 Rpt: 39/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sandra (Ms.) 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$70.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sandra (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sandra (Ms.) Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, David (Mr.) Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Rep Sons of Republic of TX		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, David (Mr.) Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Rep Sons of Republic of TX		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/39 Rpt: 40/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 07/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Linda (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Orange, TX 77632	7 Amount of Contribution (\$) \$36.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Linda (Ms.) <hr/> Contributor address; City; State; Zip Code Orange, TX 77632	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Linda (Ms.) <hr/> Contributor address; City; State; Zip Code Orange, TX 77632	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Linda (Ms.) <hr/> Contributor address; City; State; Zip Code Orange, TX 77632	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Pamela (Ms.) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77708	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/39 Rpt: 41/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 09/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Pamela (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77708	7 Amount of Contribution (\$) \$53.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Jan (Ms.) <hr/> Contributor address; City; State; Zip Code Bridge City, TX 77611	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Jan (Ms.) <hr/> Contributor address; City; State; Zip Code Bridge City, TX 77611	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Jan (Ms.) <hr/> Contributor address; City; State; Zip Code Bridge City, TX 77611	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Raquel (Judge) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77701	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/39 Rpt: 42/57
2 FILER NAME Southeast Texas Republican Women		3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jay (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77302	7 Amount of Contribution (\$) \$53.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/14 Rpt: 43/57	2 FILER NAME Southeast Texas Republican Women	3 Filer ID (Ethics Commission Filers) 00085254
4 Date 07/14/2025	5 Payee name 2025 Square, Inc.	
6 Amount (\$) \$1.52 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
8 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 Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/21/2025	Candidate/Officeholder name Office sought Office held	
Payee name 2025 Square, Inc.		
Amount (\$) \$2.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/13/2025	Candidate/Officeholder name Office sought Office held	
Payee name 2025 Square, Inc.		
Amount (\$) \$20.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/14 Rpt: 44/57	2 FILER NAME Southeast Texas Republican Women	3 Filer ID (Ethics Commission Filers) 00085254
4 Date 08/11/2025	5 Payee name 2025 Square, Inc.	
6 Amount (\$) \$3.78 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
8 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 Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/05/2025	Candidate/Officeholder name Office sought Office held	
Payee name 2025 Square, Inc.		
Amount (\$) \$2.59 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/04/2025	Candidate/Officeholder name Office sought Office held	
Payee name 2025 Square, Inc.		
Amount (\$) \$1.36 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/14 Rpt: 45/57	2 FILER NAME Southeast Texas Republican Women	3 Filer ID (Ethics Commission Filers) 00085254
4 Date 08/25/2025	5 Payee name 2025 Square, Inc.	
6 Amount (\$) \$1.36 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
8 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 Credit Card Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/26/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1.36 <input type="checkbox"/> Expenditure from corporate funds	Payee name 2025 Square, Inc. Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 Credit Card Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/08/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$7.42 <input type="checkbox"/> Expenditure from corporate funds	Payee name 2025 Square, Inc. Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/14 Rpt: 46/57	2 FILER NAME Southeast Texas Republican Women	3 Filer ID (Ethics Commission Filers) 00085254
4 Date 09/03/2025	5 Payee name 2025 Square, Inc.	
6 Amount (\$) \$1.36 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
8 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 Credit Card Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/08/2025	Candidate/Officeholder name Office sought Office held	
Payee name 2025 Square, Inc.		
Amount (\$) \$2.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/09/2025	Candidate/Officeholder name Office sought Office held	
Payee name 2025 Square, Inc.		
Amount (\$) \$1.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 credit card fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/14 Rpt: 47/57	2 FILER NAME Southeast Texas Republican Women	3 Filer ID (Ethics Commission Filers) 00085254
4 Date 09/10/2025	5 Payee name 2025 Square, Inc.	
6 Amount (\$) \$10.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
8 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 Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/22/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1.36 <input type="checkbox"/> Expenditure from corporate funds	Payee name 2025 Square, Inc. Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 Credit Card Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/29/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1.36 <input type="checkbox"/> Expenditure from corporate funds	Payee name 2025 Square, Inc. Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 Credit Card Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/14 Rpt: 48/57	2 FILER NAME Southeast Texas Republican Women	3 Filer ID (Ethics Commission Filers) 00085254
4 Date 10/06/2025	5 Payee name 2025 Square, Inc.	
6 Amount (\$) \$1.36 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
8 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 Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/14/2025	Candidate/Officeholder name Office sought Office held	
Payee name 2025 Square, Inc.		
Amount (\$) \$3.78 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/15/2025	Candidate/Officeholder name Office sought Office held	
Payee name 2025 Square, Inc.		
Amount (\$) \$13.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/14 Rpt: 49/57	2 FILER NAME Southeast Texas Republican Women	3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/03/2025	5 Payee name 2025 Square, Inc.	
6 Amount (\$) \$3.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
8 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 Credit Card Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/04/2025	Candidate/Officeholder name Office sought Office held	
Payee name 2025 Square, Inc.		
Amount (\$) \$1.36 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/05/2025	Candidate/Officeholder name Office sought Office held	
Payee name 2025 Square, Inc.		
Amount (\$) \$1.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/14 Rpt: 50/57	2 FILER NAME Southeast Texas Republican Women	3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/06/2025	5 Payee name 2025 Square, Inc.	
6 Amount (\$) \$1.36 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
8 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 Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/11/2025	Payee name 2025 Square, Inc.	
Amount (\$) \$8.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/12/2025	Payee name 2025 Square, Inc.	
Amount (\$) \$13.16 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
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 Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/14 Rpt: 51/57	2 FILER NAME Southeast Texas Republican Women	3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/13/2025	5 Payee name 2025 Square, Inc.	
6 Amount (\$) \$1.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1455 Market St. Suite 600 San Francisco, CA 94103	
8 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 Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/16/2025	Payee name Andecot, Jeffrey	
Amount (\$) \$400.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code St Mary's University San Antonio, TX 78228	
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 Speaker Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/09/2025	Payee name Carr, Dina (Ms.)	
Amount (\$) \$84.27 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2225 Stillwater Dr. Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Google	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/14 Rpt: 52/57	2 FILER NAME Southeast Texas Republican Women	3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/18/2025	5 Payee name Carr, Dina (Ms.)	
6 Amount (\$) \$91.28 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2225 Stillwater Dr. Beaumont, TX 77705	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Google 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 Google Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/02/2025	Candidate/Officeholder name Office sought Office held	
Payee name Ebeling, Jeanene (Ms.)		
Amount (\$) \$6.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2464 63rd St. Pt. Arthur, TX 77640	
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 Cards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/10/2025	Candidate/Officeholder name Office sought Office held	
Payee name Ebeling, Jeanene (Ms.)		
Amount (\$) \$21.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2464 63rd St. Pt. Arthur, TX 77640	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Cards and Stamps	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cards and Stamps
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/14 Rpt: 53/57	2 FILER NAME Southeast Texas Republican Women	3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/13/2025	5 Payee name Embracing Freedom	
6 Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 12813 Beaumont, TX 77726	
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 Donations
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/24/2025	Payee name Greene, Pat (Ms.)	
Amount (\$) \$475.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4400 Morningstar Pl. Beaumont, TX 77705	
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 TFRW Dues Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/26/2025	Payee name Hispanic Business Association	
Amount (\$) \$350.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3202 39th St. Port Arthur, TX 77642	
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 Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/14 Rpt: 54/57	2 FILER NAME Southeast Texas Republican Women	3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/18/2025	5 Payee name Hope Womens Resource Clinic	
6 Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3740 Laurel St Beaumont, TX 77707	
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 Donation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/07/2025	Payee name Joe Evans Campaign Fund	
Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 9235 Riggs Beaumont, TX 77707	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/14/2025	Payee name New Beginnings Ministries	
Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 4040 Pt. Arthur, TX 77641	
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 Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/14 Rpt: 55/57	2 FILER NAME Southeast Texas Republican Women	3 Filer ID (Ethics Commission Filers) 00085254
4 Date 11/17/2025	5 Payee name New Beginnings Ministries	
6 Amount (\$) \$150.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 4040 Pt. Arthur, TX 77641	
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 Donations
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/10/2025	Payee name The MAGA Mall USA	
Amount (\$) \$138.58 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2740 SW Martin Downs Blvd #331 Palm City, FL 34990	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Caps & T-Shirt
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/14/2025	Payee name The Pompano	
Amount (\$) \$2,134.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 330 Twin City Hwy. Pt. Neches, TX 77651	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meals for Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/14 Rpt: 56/57	2 FILER NAME Southeast Texas Republican Women	3 Filer ID (Ethics Commission Filers) 00085254
4 Date 09/11/2025	5 Payee name The Pompano	
6 Amount (\$) \$1,400.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 330 Twin City Hwy. Pt. Neches, TX 77651	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meeting Meal
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/16/2025	Candidate/Officeholder name Office sought Office held	
Payee name The Pompano		
Amount (\$) \$1,575.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 330 Twin City Hwy. Pt. Neches, TX 77651	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meal for meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/13/2025	Candidate/Officeholder name Office sought Office held	
Payee name The Pompano		
Amount (\$) \$1,715.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 330 Twin City Hwy. Pt. Neches, TX 77651	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meal for meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Southeast Texas Republican Women	3 Filer ID (Ethics Commission Filers) 00085254
4 Date 12/12/2025	5 Payee name U. S. Post Office	
6 Amount (\$) 188.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 223 N. 14 th. St. Nederland, TX 77627	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Box Rental	(b) Description (See instructions regarding type of information required.) PO Box Rental