

**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) 00055357	2 Total pages filed: 24			
3 COMMITTEE NAME Robertson County Republican Women		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/12/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged				
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 184 New Baden, TX 77870						
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.			FIRST Linda E.	MI	
	NICKNAME	LAST Schweitzer	SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 3544 FM 1940 Franklin, TX 77856		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; PO Box 184 New Baden, TX 77870					
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (979) 969-3332					
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 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
11 ELECTION	Month	Day	Year	ELECTION DATE <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 Robertson County Republican Women		13 FILER ID (Ethics Commission Filers) 00055357
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 checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 8,226.86
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 16,821.86
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 1,744.58
	4. TOTAL POLITICAL EXPENDITURES	\$ 21,281.13
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 18,256.22
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
16 AFFIDAVIT		
<p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</p> <p>Ms. Linda E. Schweitzer _____ Signature of Campaign Treasurer</p>		
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.		
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 24

17 COMMITTEE NAME Robertson County Republican Women	18 FILER ID (Ethics Commission Filers) 00055357
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3. <input checked="" 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 checked="" type="checkbox"/> SCHEDULE E: LOANS	
10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
11. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
12. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/8 Rpt: 4/24
2 FILER NAME Robertson County Republican Women		3 Filer ID (Ethics Commission Filers) 00055357
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alston, Kay	7 Amount of Contribution (\$) \$125.00
	6 Contributor address; City; State; Zip Code Thornton, TX 76687	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alston, Kay	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Thornton, TX 76687	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alston, Kay	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Thornton, TX 76687	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Carla (Mrs.)	Amount of Contribution (\$) \$160.00
	Contributor address; City; State; Zip Code Calvert, TX 77837	
Principal occupation / Job title (See Instructions) Justice of the peace		Employer (See Instructions) Robertson county
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becktold, Diane (Mrs.)	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Franklin, TX 77870	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/8 Rpt: 5/24
2 FILER NAME Robertson County Republican Women		3 Filer ID (Ethics Commission Filers) 00055357
4 Date 09/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becktold, Diane (Mrs.)	7 Amount of Contribution (\$) \$115.00
	6 Contributor address; City; State; Zip Code Franklin, TX 77870	
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) N/A
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black Dog Security	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Hockley, TX 77446-6103	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breazeale, John	Amount of Contribution (\$) \$325.00
	Contributor address; City; State; Zip Code Franklin, TX 77856	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fauth111, Joseph	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Plantersville, TX 77363	
Principal occupation / Job title (See Instructions) COUNTY jUDGE		Employer (See Instructions) GRIMES COUNTY
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guild, Joan	Amount of Contribution (\$) \$360.00
	Contributor address; City; State; Zip Code Calvert, TX 77837	
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: 3/8 Rpt: 6/24
2 FILER NAME Robertson County Republican Women		3 Filer ID (Ethics Commission Filers) 00055357
4 Date 09/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guild, Joan	7 Amount of Contribution (\$) \$350.00
	6 Contributor address; City; State; Zip Code Calvert, TX 77837	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrickson, Edward	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code New Baden, TX 77870	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Mary	Amount of Contribution (\$) \$750.00
	Contributor address; City; State; Zip Code Franklin, TX 77856	
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions)
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Mary	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Franklin, TX 77856	
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions)
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longley, Jayne	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Franklin, TX 77856	
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: 4/8 Rpt: 7/24
2 FILER NAME Robertson County Republican Women			3 Filer ID (Ethics Commission Filers) 00055357
4 Date 08/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merchant, Mary	7 Amount of Contribution (\$) \$240.00	
	6 Contributor address; City; State; Zip Code Franklin, TX 77856		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)	
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Josephine	Amount of Contribution (\$) \$240.00	
	Contributor address; City; State; Zip Code Bryan, TX 77808-4025		
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, Josephine	Amount of Contribution (\$) \$250.00	
	Contributor address; City; State; Zip Code Bryan, TX 77808-4025		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)	
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Patty	Amount of Contribution (\$) \$100.00	
	Contributor address; City; State; Zip Code Franklin, TX 77856		
Principal occupation / Job title (See Instructions) beautician		Employer (See Instructions) self	
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morton, Julia	Amount of Contribution (\$) \$125.00	
	Contributor address; City; State; Zip Code Grosbeck, TX 76642		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Julia Morton PLLC	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/8 Rpt: 8/24
2 FILER NAME Robertson County Republican Women		3 Filer ID (Ethics Commission Filers) 00055357
4 Date 09/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parolini, April	7 Amount of Contribution (\$) \$125.00
	6 Contributor address; City; State; Zip Code Mexia, TX 76667	
8 Principal occupation / Job title (See Instructions) Marketing Coordinator		9 Employer (See Instructions) Northland Communications
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Gloria	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Taylor , TX 76574-1862	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Lanny	Amount of Contribution (\$) \$170.00
	Contributor address; City; State; Zip Code Franklin, TX 77856	
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruland, William	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Franklin, TX 77856	
Principal occupation / Job title (See Instructions) Sheriff		Employer (See Instructions) ROBCO
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russ, Bryan (Judge)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Franklin, TX 77856	
Principal occupation / Job title (See Instructions) districtJudge		Employer (See Instructions) Robertson Co

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 6/8 Rpt: 9/24	
2 FILER NAME Robertson County Republican Women			3 Filer ID (Ethics Commission Filers) 00055357	
4 Date 09/20/2025	5 Full name of contributor Russ, Laura	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$120.00	
	6 Contributor address; City; State; Zip Code Franklin, TX 77856			
8 Principal occupation / Job title (See Instructions) homemaker		9 Employer (See Instructions)		
Date 09/03/2025	Full name of contributor Sanders, Stephanie		<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Franklin, TX 77856			
Principal occupation / Job title (See Instructions) County Clerk		Employer (See Instructions) Robertson Co		
Date 08/27/2025	Full name of contributor Schweitzer, Linda		<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$400.00
	Contributor address; City; State; Zip Code New Baden, TX 77870			
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)		
Date 08/26/2025	Full name of contributor Schweitzer, Linda		<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$180.00
	Contributor address; City; State; Zip Code New Baden, TX 77870			
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)		
Date 09/05/2025	Full name of contributor Servos, Gregory		<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$240.00
	Contributor address; City; State; Zip Code Houston, TX 77095			
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) self employed		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/8 Rpt: 10/24
2 FILER NAME Robertson County Republican Women		3 Filer ID (Ethics Commission Filers) 00055357
4 Date 08/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Small, Patricia	7 Amount of Contribution (\$) \$120.00
	6 Contributor address; City; State; Zip Code Franklin, TX 77856	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Charles Schwertner	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Georgetown, TX 78627-2448	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, James	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Franklin, TX 77856	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, James	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Franklin, TX 77856	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkerson, Mary	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Liberty Hill, TX 78642	
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: 8/8 Rpt: 11/24
2 FILER NAME Robertson County Republican Women			3 Filer ID (Ethics Commission Filers) 00055357
4 Date 09/09/2025	5 Full name of contributor hairston, charles 6 Contributor address; City; State; Zip Code franklin, TX 77856	7 Amount of Contribution (\$) \$120.00	
8 Principal occupation / Job title (See Instructions) Commissioner		9 Employer (See Instructions) Robt. Co	
Date 08/28/2025	Full name of contributor rampy, Ty Contributor address; City; State; Zip Code calvert, TX 77837	Amount of Contribution (\$) \$120.00	
Principal occupation / Job title (See Instructions) county commissioner		Employer (See Instructions) robertson co	

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.			
2 FILER NAME Robertson County Republican Women		1 Total pages Schedule B: Sch: 1/1 Rpt: 12/24	
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0.00	
5 Date	6 Full name of pledgor 7 Pledgor Address; City; State; Zip Code	8 Amount of pledge (\$)	9 In-kind description (If applicable)
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 13/24
2 FILER NAME Robertson County Republican Women		3 Filer ID (Ethics Commission Filers) 00055357
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/11 Rpt: 14/24	2 FILER NAME Robertson County Republican Women	3 Filer ID (Ethics Commission Filers) 00055357
4 Date 09/16/2025	5 Payee name BCS Print Signs and Graphic	
6 Amount (\$) \$110.96	7 Payee address; City; 3141 Briarcrest Drive Suite 501 B Bryan, TX 77802	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Programs for Constitution Dinner
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/11/2025	Payee name BCS Print Signs and Graphic	
Amount (\$) \$195.12	Payee address; City; 3141 Briarcrest Drive Suite 501 B Bryan, TX 77802	
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 invitations/envelopes for office open house
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/04/2025	Payee name Backing ROBCO Foundation	
Amount (\$) \$500.00	Payee address; City; 9775 James Cemetery Rd franklin, TX 77856	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) donation	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to provide aide to law enforcement in Robertson County
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/11 Rpt: 15/24	2 FILER NAME Robertson County Republican Women	3 Filer ID (Ethics Commission Filers) 00055357
4 Date 08/26/2025	5 Payee name Bobos Nursury	
6 Amount (\$) \$116.87	7 Payee address; City; 3765 US 79 Buffalo, TX 75831	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense down paymeny flowers for Constitution Dinner
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/19/2025	Payee name Entergy	
Amount (\$) \$263.42	Payee address; City; 611 W HWY 79 FRANKLIN, LA 77856	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 electric bill 09/19/2025
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name Entergy	
Amount (\$) \$103.09	Payee address; City; 611 W HWY 79 FRANKLIN, LA 77856	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 electric bill
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/11 Rpt: 16/24	2 FILER NAME Robertson County Republican Women	3 Filer ID (Ethics Commission Filers) 00055357
4 Date 07/21/2025	5 Payee name Guild, Joan	
6 Amount (\$) \$388.00	7 Payee address; City; PO Box 729 Calvert, TX 77837	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense VLS End of the class donation to flood victims
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/01/2025	Payee name Hartford Insurance	
Amount (\$) \$685.00	Payee address; City; 3600 wiseman blvd san antonio, TX 78251	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) insurance	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office insurance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/21/2025	Payee name Highfield Consulting	
Amount (\$) \$5,000.00	Payee address; City; 1300 Playmoor Drive Palm Harbor, FL 34683	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 for Constitution Dinner Nick Adams
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/11 Rpt: 17/24	2 FILER NAME Robertson County Republican Women	3 Filer ID (Ethics Commission Filers) 00055357
4 Date 09/19/2025	5 Payee name Janet's Flowers	
6 Amount (\$) \$275.00	7 Payee address; City; State; Zip Code P.O. Box 434 Bremond, TX 76629	
<input type="checkbox"/> Expenditure from corporate funds	<p>8 PURPOSE OF EXPENDITURE</p> <p>(a) Category (See Categories listed at the top of this schedule) Event Expense</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flowers for Constitution Dinner</p>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought
Date 07/17/2025	Payee name Lamire, Karen	Office held Office held
Amount (\$) \$120.50	Payee address; City; State; Zip Code 1978 Firestation Rd. Franklin, TX 77856	
<input type="checkbox"/> Expenditure from corporate funds	<p>PURPOSE OF EXPENDITURE</p> <p>(a) Category (See Categories listed at the top of this schedule) Event Expense</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meal prep VLS</p>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought
Date 07/17/2025	Payee name Longley, Jayne (Mrs.)	Office held Office held
Amount (\$) \$157.83	Payee address; City; State; Zip Code PO Box 505 Franklin, TX 77856	
<input type="checkbox"/> Expenditure from corporate funds	<p>PURPOSE OF EXPENDITURE</p> <p>(a) Category (See Categories listed at the top of this schedule) Event Expense</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for VLS Store</p>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/11 Rpt: 18/24	2 FILER NAME Robertson County Republican Women	3 Filer ID (Ethics Commission Filers) 00055357
4 Date 07/18/2025	5 Payee name Merchant, Mary	
6 Amount (\$) \$330.00	7 Payee address; City; PO Box 908 Franklin, TX 77856	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food Preperation Vacation Liberty School
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/16/2025	Payee name Merchant, Mary	
Amount (\$) \$624.00	Payee address; City; PO Box 908 Franklin, TX 77856	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/10/2025	Payee name Miller, Josephine	
Amount (\$) \$500.00	Payee address; City; 9959 Jackrabbit Lane Bryan, TX 77808-4025	
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 Vacation Liberty School curriculum
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/11 Rpt: 19/24	2 FILER NAME Robertson County Republican Women	3 Filer ID (Ethics Commission Filers) 00055357
4 Date 07/31/2025	5 Payee name Mitchell, Patti	
6 Amount (\$) \$650.00	7 Payee address; City; State; Zip Code PO Box 667 Franklin, TX 77856	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Office Rental August 2025
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Mitchell, Patti	
Amount (\$) \$650.00	Payee address; City; State; Zip Code PO Box 667 Franklin, TX 77856	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office rental sept 2025
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/30/2025	Payee name Mitchell, Patti	
Amount (\$) \$650.00	Payee address; City; State; Zip Code PO Box 667 Franklin, TX 77856	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 rent October 2025
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/11 Rpt: 20/24	2 FILER NAME Robertson County Republican Women	3 Filer ID (Ethics Commission Filers) 00055357
4 Date 11/01/2025	5 Payee name Mitchell, Patti	
6 Amount (\$) \$650.00	7 Payee address; City; State; Zip Code PO Box 667 Franklin, TX 77856	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 November rent
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/23/2025	Payee name Mitchell, Patti	
Amount (\$) \$1,300.00	Payee address; City; State; Zip Code PO Box 667 Franklin, TX 77856	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Rent for December 2025 and January 2026
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/10/2025	Payee name Oxtail Factory	
Amount (\$) \$1,550.00	Payee address; City; State; Zip Code 919 w. brown st hearne texas, TX 77859	
<input type="checkbox"/> Expenditure from corporate funds	(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 Catering Constitution Dinner
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/11 Rpt: 21/24	2 FILER NAME Robertson County Republican Women	3 Filer ID (Ethics Commission Filers) 00055357
4 Date 09/22/2025	5 Payee name Oxtail Factory	
6 Amount (\$) \$1,605.28	7 Payee address; City; State; Zip Code 919 w. brown st hearne texas, TX 77859	
<input type="checkbox"/> Expenditure from corporate funds	(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 catering constitution dinner
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/20/2025	Payee name Player, Michael	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 1101 Willis, TX 77378	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense music/constitution dinner
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/13/2025	Payee name Sam's Club	
Amount (\$) \$144.05	Payee address; City; State; Zip Code 1405 Earl Rudder Fwy. S Bryan, TX 77845	
<input type="checkbox"/> Expenditure from corporate funds	(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 food for Sheriff Ruland town hall
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/11 Rpt: 22/24	2 FILER NAME Robertson County Republican Women	3 Filer ID (Ethics Commission Filers) 00055357
4 Date 09/11/2025	5 Payee name Sam's Club	
6 Amount (\$) \$145.94	7 Payee address; City; State; Zip Code 1405 Earl Rudder Fwy. S Bryan, TX 77845	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cultery for constitution dinner
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/25/2025	Payee name St. Mary's Catholic Church	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 715 N. Main St. Bremond, TX 76629	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rental Constitution Dinner
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/21/2025	Payee name Texan Printing	
Amount (\$) \$257.05	Payee address; City; State; Zip Code 3141 Briarcrest Drive Suite 501 Bryan, TX 77802	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Door sign
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/11 Rpt: 23/24	2 FILER NAME Robertson County Republican Women	3 Filer ID (Ethics Commission Filers) 00055357
4 Date 12/05/2025	5 Payee name Texas Federation of Republican Women	
6 Amount (\$) \$809.00	7 Payee address; City; State; Zip Code 13740 N. Highway 183, Ste. J4 Austin, TX 78750-1832	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership dues
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/23/2025	Payee name Texas Federation of Republican Women	
Amount (\$) \$203.44	Payee address; City; State; Zip Code 13740 N. Highway 183, Ste. J4 Austin, TX 78750-1832	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW PAC table honoring Jo Miller our past President
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/31/2025	Payee name The Dictionary Project	
Amount (\$) \$552.00	Payee address; City; State; Zip Code P. O. Box 1845 Charleston, SC 29402	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Distribution of dictionaries to the 5th graders of Robertson County
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/11 Rpt: 24/24	2 FILER NAME Robertson County Republican Women	3 Filer ID (Ethics Commission Filers) 00055357	
4 Date 07/17/2025	5 Payee name Worship Center		
6 Amount (\$) \$250.00	7 Payee address; City; 231 Cooks Lane Franklin, TX 77856		
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense		
8 PURPOSE OF EXPENDITURE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense rent Vacation Liberty School		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held