

# 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) 00054336	2 Total pages filed: 32
3 COMMITTEE NAME Nueces County Republican Women			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/01/2026 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 6737  Corpus Christi, TX 78466		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Shelley NICKNAME LAST SUFFIX Brandt		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 11617 Up River Road  Corpus Christi, TX 78410		
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 11617 Up River Road  Corpus Christi, TX 78410		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (361) 728-4440		
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

<b>12 COMMITTEE NAME</b> Nueces County Republican Women		<b>13 Filer ID</b> (Ethics Commission Filers) 00054336
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
	<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 8,673.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 5,861.91
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 18,938.44
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00
<b>16 AFFIDAVIT</b>  <div style="text-align: right;">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.</div> <div style="text-align: right;">_____ Shelley Brandt Signature of Campaign Treasurer</div> <div>AFFIX NOTARY STAMP / SEAL ABOVE</div> 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 32

<b>17 COMMITTEE NAME</b> Nueces County Republican Women		<b>18 Filer ID</b> (Ethics Commission Filers) 00054336
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,289.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2,384.00
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	\$ 1,989.63
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 3,872.28
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**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/14 Rpt: 4/32
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 11/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Judy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) None		<b>9</b> Employer (See Instructions) none
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Keith <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Candidate for TX-34		Employer (See Instructions) Keith Allen 4 Congress
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashmore, Ace <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	Amount of Contribution (\$)  \$90.00
Principal occupation / Job title (See Instructions) Aerospace engineer		Employer (See Instructions) self
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balko, Neely <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) City of Corpus Christi
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barclay, Susan <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78412	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Nueces County

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/14 Rpt: 5/32
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 07/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauer, Scott <b>6</b> Contributor address; City; State; Zip Code  Victoria, TX 77904	<b>7</b> Amount of Contribution (\$)  \$601.00
<b>8</b> Principal occupation / Job title (See Instructions) District Director		<b>9</b> Employer (See Instructions) Congressman Michael Cloud
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergsma, Connie Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergsma, Connie Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergsma, Connie Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergsma, Mike Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	Amount of Contribution (\$)  \$95.00
Principal occupation / Job title (See Instructions) Geophysicist		Employer (See Instructions) Bergsma Consulting

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/14 Rpt: 6/32
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 11/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergsma, Mike <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Geophysicist		<b>9</b> Employer (See Instructions) Bergsma Consulting
Date 07/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradford, Rebecca <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78414	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradford, Rebecca <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78414	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradford, Rebecca <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78414	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradford, Rebecca <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78414	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/14 Rpt: 7/32
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 12/02/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradford, Rebecca <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78414	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Owner		<b>9</b> Employer (See Instructions) Self Employed
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Shelley <hr/> Contributor address; City; State; Zip Code  CORPUS CHRISTI, TX 78410	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Brandt Equipment
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Shelly <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Brandt Equip
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Shelly <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Brandt Equip
Date 07/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Shelly <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Brandt Equip

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/14 Rpt: 8/32
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 10/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Shelly <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) CPA		<b>9</b> Employer (See Instructions) Brandt Equip
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Shelly <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Brandt Equip
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buentello, Dianne <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buentello, Luis <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions)
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calderone, Carmen <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78414	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Analyzer Tech		Employer (See Instructions) Flint Hills Resources



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/14 Rpt: 9/32
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 10/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Joan <b>6</b> Contributor address; City; State; Zip Code Corpus Christi, TX 78413	<b>7</b> Amount of Contribution (\$) \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired Teacher		<b>9</b> Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clubb, Rebecca Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78460	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooley, Amy Contributor address; City; State; Zip Code Corpus Christi, TX 78410	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corrente, Dorina Contributor address; City; State; Zip Code Corpus Christi, TX 78415	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cron, Jenny Contributor address; City; State; Zip Code Corpus Christi, TX 78412	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/14 Rpt: 10/32
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 07/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorsey, Chris <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	<b>7</b> Amount of Contribution (\$)  \$85.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) self
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorsey, Chris <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorsey, Chris <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorsey, Jenny <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) County Attorney		Employer (See Instructions) Nueces County
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Julian <hr/> Contributor address; City; State; Zip Code  CORPUS CHRISTI, TX 78411	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/14 Rpt: 11/32
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 10/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fosnaugh, Allison <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78414	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Staff		<b>9</b> Employer (See Instructions) CC Pregnancy Center
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillen, Loretta <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired teacher		Employer (See Instructions)
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Nancy <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$140.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Nancy <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Nancy <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/14 Rpt: 12/32
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 12/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Nancy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) none
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinojosa, Fred <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Business man		Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, David (The Honorable) <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78418	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Judge, 148TH District Court		Employer (See Instructions) Nueces County
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein , Inna (The Honorable) <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78418	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) 214th District Court		Employer (See Instructions) Nueces County
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamb, John <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78401	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/14 Rpt: 13/32
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 07/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamb, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78401	<b>7</b> Amount of Contribution (\$)  \$68.00
<b>8</b> Principal occupation / Job title (See Instructions) Retail		<b>9</b> Employer (See Instructions) self-employed
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamb, Susan <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78401	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) self-employed
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Mary <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78415	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Home health		Employer (See Instructions) River City/Visiting Angels
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Amy <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78414	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) none
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Amy <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78414	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) none

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/14 Rpt: 14/32
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milby, Laura <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milby, Laura Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milby, Laura Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milby, Richard Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Carrie Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Congressional staff		Employer (See Instructions) Congressman Michael Cloud

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/14 Rpt: 15/32
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 07/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosco, Dit <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosco, Dit <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ohman, Jennifer <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78418	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Publicist		Employer (See Instructions) self
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Joe Michael <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Rig Hand		Employer (See Instructions) Nabors Drilling
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinson, Jana <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Executive Director of a Non Profit		Employer (See Instructions) CC Pregnancy Center

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/14 Rpt: 16/32
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 10/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinson, Jana <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Executive Director of a Non Profit		<b>9</b> Employer (See Instructions) CC Pregnancy Center
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray, Steve <hr/> Contributor address; City; State; Zip Code  Austin, TX 78767	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Political Consultant		Employer (See Instructions) Steve Ray Associates
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Connie <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	Amount of Contribution (\$)  \$755.00
Principal occupation / Job title (See Instructions) County Judge		Employer (See Instructions) Nueces County
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silver, Megan <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired teacher		Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tschritter, Luke <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78418	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Political Consultant		Employer (See Instructions) self



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/14 Rpt: 17/32
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 10/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tschritter, Maddie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78418	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Owner		<b>9</b> Employer (See Instructions)
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaughn, Carolyn <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78426	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/4 Rpt: 18/32	
2 FILER NAME Nueces County Republican Women		3 Filer ID (Ethics Commission Filers) 00054336	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 280.00	
5 Date 07/12/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradford, Rebecca	8 Amount of contribution (\$) \$55.00	9 In-kind contribution description 3 bottles of wine
7 Contributor address; City; State; Zip Code  Corpus Christi, TX 78414		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Business Owner		11 Employer (FOR NON-JUDICIAL) (See instructions) Self Employed	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Shelly	Amount of contribution (\$) \$120.00	In-kind contribution description T-shirt, blanket, Christmas ornaments, Electric wine bottle opener
Contributor address; City; State; Zip Code  Corpus Christi, TX 78410		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CPA		Employer (FOR NON-JUDICIAL) (See instructions) Brandt Equip	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamb, Susan	Amount of contribution (\$) \$55.00	In-kind contribution description Coffee blanket, Hester's Gift Certificate
Contributor address; City; State; Zip Code  Corpus Christi, TX 78401		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retail		Employer (FOR NON-JUDICIAL) (See instructions) self-employed	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 2/4 Rpt: 19/32	
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$</b> 280.00	
<b>5</b> Date 07/12/2025	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamb, Susan	<b>8</b> Amount of contribution (\$) \$100.00	<b>9</b> In-kind contribution description Spa kit
	<b>7</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78401		
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retail		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) self-employed	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, John	Amount of contribution (\$) \$170.00	In-kind contribution description charcuterie board & book; Christmas in July tree w/ ornaments & party plates
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78414		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Rancher		Employer (FOR NON-JUDICIAL) (See instructions) Self	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, John	Amount of contribution (\$) \$120.00	In-kind contribution description Doterra diffuser & set of oils; perfume & bag
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78414		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Rancher		Employer (FOR NON-JUDICIAL) (See instructions) Self	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 3/4 Rpt: 20/32	
<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$</b> 280.00	
<b>5</b> Date 07/12/2025	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, John	<b>8</b> Amount of contribution (\$) \$30.00	<b>9</b> In-kind contribution description Dog bowl & stand
	<b>7</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78414		
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Rancher		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) Self	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milby, Laura	Amount of contribution (\$) \$71.00	In-kind contribution description Cooler on Wheels
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78410		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pate, Linda	Amount of contribution (\$) \$400.00	In-kind contribution description 15 Bottles of Wine
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78411		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Community Volunteer		Employer (FOR NON-JUDICIAL) (See instructions) none	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 4/4 Rpt: 21/32	
2 FILER NAME Nueces County Republican Women		3 Filer ID (Ethics Commission Filers) 00054336	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 280.00	
5 Date 07/12/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scroggs, Cindy	8 Amount of contribution (\$) \$283.00	9 In-kind contribution description Gift Basket with umbrella, cosmetic bag and backpack
7 Contributor address; City; State; Zip Code  Corpus Christi, TX 78411		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Boutique owner		11 Employer (FOR NON-JUDICIAL) (See instructions) Self	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ticheck, Terry	Amount of contribution (\$) \$700.00	In-kind contribution description (2) Family memberships to Nichols Gun Range
Contributor address; City; State; Zip Code  Corpus Christi, TX 78410		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Gun handler/manager		Employer (FOR NON-JUDICIAL) (See instructions) Nichols Guns	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/6 Rpt: 22/32	<b>2</b> FILER NAME Nueces County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 08/23/2025	<b>5</b> Payee name Nueces County Republican Party	
<b>6</b> Amount (\$) \$634.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 5151 Flynn Parkway  Corpus Christi, TX 78411	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 1/2 net proceeds from Silent Auction
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/12/2025	Payee name Square, Inc.	
Amount (\$) \$1.06  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market Street Unit 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchant Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/02/2025	Payee name Square, Inc.	
Amount (\$) \$0.90  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market Street Unit 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchant Fee
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.

<b>1</b> Total pages Schedule F1: Sch: 2/6 Rpt: 23/32	<b>2</b> FILER NAME Nueces County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 07/14/2025	<b>5</b> Payee name Square, Inc.	
<b>6</b> Amount (\$) \$33.61  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1455 Market Street Unit 600 San Francisco, CA 94103	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchant Fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2025	Payee name Square, Inc.	
Amount (\$) \$2.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market Street Unit 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 Merchant Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/14/2025	Payee name Square, Inc.	
Amount (\$) \$17.37  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market Street Unit 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 Merchant 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.

<b>1</b> Total pages Schedule F1: Sch: 3/6 Rpt: 24/32	<b>2</b> FILER NAME Nueces County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 11/12/2025	<b>5</b> Payee name Square, Inc.	
<b>6</b> Amount (\$) \$4.69  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1455 Market Street Unit 600 San Francisco, CA 94103	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchant Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Square, Inc.		
Amount (\$) \$1.38  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market Street 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 Merchant Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/09/2025	Candidate/Officeholder name Office sought Office held	
Payee name Square, Inc.		
Amount (\$) \$4.24  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market Street 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 Merchant 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.

<b>1</b> Total pages Schedule F1: Sch: 4/6 Rpt: 25/32	<b>2</b> FILER NAME Nueces County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 12/19/2025	<b>5</b> Payee name Square, Inc	
<b>6</b> Amount (\$) \$0.50  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1455 Market Street Suite 600 San Francisco, CA 94103	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchant Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/08/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe		
Amount (\$) \$0.45  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 354 Oyster Point Blvd South San Fransico, CA 94080	
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 Merchant Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/22/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe		
Amount (\$) \$1.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 354 Oyster Point Blvd South San Fransico, CA 94080	
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 Merchant 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.

<b>1</b> Total pages Schedule F1: Sch: 5/6 Rpt: 26/32	<b>2</b> FILER NAME Nueces County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> Date 12/29/2025	<b>5</b> Payee name Stripe	
<b>6</b> Amount (\$) \$1.32  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 354 Oyster Point Blvd  South San Fransico, CA 94080	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchant Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/29/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe		
Amount (\$) \$1.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 354 Oyster Point Blvd  South San Fransico, CA 94080	
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 Merchant Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/31/2025	Candidate/Officeholder name Office sought Office held	
Payee name Texas College Republicans PAC		
Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4151 Wellborn Road #1204  College Station, TX 77801	
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 Donation
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: 6/6 Rpt: 27/32	2 FILER NAME Nueces County Republican Women	3 Filer ID (Ethics Commission Filers) 00054336
4 Date 07/11/2025	5 Payee name Threaded Expressions	
6 Amount (\$) \$784.81  <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 104 Whitewing  Robstown, TX 78380	
8 PURPOSE OF EXPENDITURE	(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 T-Shirts with Club Logo
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 1/5 Rpt: 28/32		2 FILER NAME Nueces County Republican Women		3 Filer ID (Ethics Commission Filers) 00054336	
4 CREDIT CARD ISSUER		Name of financial institution Frost Bank		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$740.43	(b) Date of Charge 07/15/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name WIX.com, Inc.		(b) Payee address; City, State, Zip Code 100 Gansevoort Street New York, NY 10014	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Initial Website fee	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$672.00	(b) Date of Charge 07/30/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name The Dictionary Project		(b) Payee address; City, State, Zip Code P.O. Box 180159 Coronado, CA 92178	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Donation of Dictionaries to local schools	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$84.12	(b) Date of Charge 10/02/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Amazon		(b) Payee address; City, State, Zip Code 410 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Books to donate to Library	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 2/5 Rpt: 29/32		2 FILER NAME Nueces County Republican Women		3 Filer ID (Ethics Commission Filers) 00054336	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$925.00	(b) Date of Charge 11/18/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Texas Federation of Republican		(b) Payee address; City, State, Zip Code P. O. Box 171146 Austin, TX 78717-0041	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Membership dues	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$20.00	(b) Date of Charge 11/18/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Texas Federation of Republican		(b) Payee address; City, State, Zip Code P. O. Box 171146 Austin, TX 78717-0041	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Initial filing Membership Dues	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$11.30	(b) Date of Charge 11/18/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Square, Inc.		(b) Payee address; City, State, Zip Code 1455 Market Street Unit 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Merchant Fees	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 3/5 Rpt: 30/32		2 FILER NAME Nueces County Republican Women		3 Filer ID (Ethics Commission Filers) 00054336	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$625.00	(b) Date of Charge 12/19/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Texas Federation of Republican		(b) Payee address; City, State, Zip Code P. O. Box 171146 Austin, TX 78717-0041	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Membership Dues. Paid \$375 too much, but will get a credit.	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$7.50	(b) Date of Charge 12/19/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Square,Inc		(b) Payee address; City, State, Zip Code 1455 Market Street Suite 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Merchant Fees	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$0.20	(b) Date of Charge 12/18/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Square,Inc		(b) Payee address; City, State, Zip Code 1455 Market Street Suite 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Merchant Fees	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 4/5 Rpt: 31/32		2 FILER NAME Nueces County Republican Women		3 Filer ID (Ethics Commission Filers) 00054336	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$38.86	(b) Date of Charge 07/15/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name WIX.com, Inc.		(b) Payee address; City, State, Zip Code 100 Gansevoort Street New York, NY 10014	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Website fee	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$447.57	(b) Date of Charge 10/06/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Thift Books Global		(b) Payee address; City, State, Zip Code 18300 Cascade Ave S, Ste 150 Seattle, WA 98188	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Books for donation to library	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$25.00	(b) Date of Charge 10/21/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Texas Federation of Republican		(b) Payee address; City, State, Zip Code P. O. Box 171146 Austin, TX 78717-0041	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Membership fees	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

## EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 5/5 Rpt: 32/32	<b>2</b> FILER NAME Nueces County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054336
<b>4</b> CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b> PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$0.30	(b) Date of Charge 10/21/2025	(c) Date(s) Credit Card Issuer Paid
<b>7</b> PAYEE	(a) Payee name Square, Inc.		(b) Payee address; City, State, Zip Code 1455 Market Street Unit 600 San Francisco, CA 94103
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Merchant Fee paid on purchase
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
<b>PAYMENT</b> <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$275.00	(b) Date of Charge 11/05/2025	(c) Date(s) Credit Card Issuer Paid
<b>PAYEE</b>	(a) Payee name Dreamers and Walkers		(b) Payee address; City, State, Zip Code 15450 Cruiser Unit A CORPUS CHRISTI, TX 78418
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Website Design
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		