

**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) 00016015	2 Total pages filed: 22			
3 COMMITTEE NAME Republican Women of Gregg County P.A.C.		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/02/2026 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 P.O. Box 5 Longview, TX 75606						
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.			FIRST Martha J.	MI	
	NICKNAME Marty	LAST Rhymes	SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 2105 E. Old U.S. Hwy. 80 White Oak, TX 75693		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 2105 E. Old US Hwy 80 White Oak, TX 75693					
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (903) 746-0281					
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			Month Day Year 12/31/2025	THROUGH	
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		ELECTION TYPE		

GO TO PAGE 2

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

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Republican Women of Gregg County P.A.C.		13 FILER ID (Ethics Commission Filers) 00016015
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	\$ 7,119.94
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 33,784.94
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 918.02
	4. TOTAL POLITICAL EXPENDITURES	\$ 20,849.23
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 20,722.15
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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

Ms. Martha J. Rhymes

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 22

17 COMMITTEE NAME Republican Women of Gregg County P.A.C.	18 FILER ID (Ethics Commission Filers) 00016015
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 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	
11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/11 Rpt: 4/22
2 FILER NAME Republican Women of Gregg County P.A.C.		3 Filer ID (Ethics Commission Filers) 00016015
4 Date 07/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anam Cara Wellness 6 Contributor address; City; State; Zip Code Jacksonville, TX 75766	7 Amount of Contribution (\$) \$1,250.00
	8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apple, Gail Contributor address; City; State; Zip Code Longview, TX 75603	Amount of Contribution (\$) \$350.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Homemaker	
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apple, Gail Contributor address; City; State; Zip Code Longview, TX 75603	Amount of Contribution (\$) \$75.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Homemaker	
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arabella Retirement Contributor address; City; State; Zip Code Longview, TX 75605	Amount of Contribution (\$) \$1,250.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becket , Melissa Contributor address; City; State; Zip Code Longview , TX 75604	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Homemaker N/A	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/11 Rpt: 5/22
2 FILER NAME Republican Women of Gregg County P.A.C.		3 Filer ID (Ethics Commission Filers) 00016015
4 Date 09/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, Melissa	7 Amount of Contribution (\$) \$115.00
	6 Contributor address; City; State; Zip Code Longview, TX 75604	
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bespoke Rehab	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Longview, TX 75604	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobo, Linda	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Hallsville, TX 75650	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bostick, Ray (Commissioner)	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Longview, TX 75604	
Principal occupation / Job title (See Instructions) Commissioner		Employer (See Instructions) Gregg County
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Brady	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Henderson, TX 75652	
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Humana

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/11 Rpt: 6/22
2 FILER NAME Republican Women of Gregg County P.A.C.		3 Filer ID (Ethics Commission Filers) 00016015
4 Date 10/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Brad (Rev.)	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code Kilgore, TX 75662	
8 Principal occupation / Job title (See Instructions) Pastor		9 Employer (See Instructions) Church
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combat Warriors	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Carthage, NC 28327	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Concho Hearts Hospice	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code Dianna, TX 75640	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Teresa	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Longview, TX 75605	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) none
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coon, Edith	Amount of Contribution (\$) \$420.00
	Contributor address; City; State; Zip Code Kilgore, TX 75662	
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: 4/11 Rpt: 7/22
2 FILER NAME Republican Women of Gregg County P.A.C.		3 Filer ID (Ethics Commission Filers) 00016015
4 Date 09/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cundiff, Karen	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code Longview, TX 75605	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cundiff, Karen	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Longview, TX 75605	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeHoff, Sharon	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code Longview, TX 75605	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeHoff, Sharon	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Longview, TX 75605	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean, Jay (Rep.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Longview, TX 75605	
Principal occupation / Job title (See Instructions) Representative		Employer (See Instructions) The People

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/11 Rpt: 8/22
2 FILER NAME Republican Women of Gregg County P.A.C.		3 Filer ID (Ethics Commission Filers) 00016015
4 Date 10/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dulweber, Vincent (Judge)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Longview, TX 75601	
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) County of Gregg
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eastman Chemical	Amount of Contribution (\$) \$520.00
	Contributor address; City; State; Zip Code Longview, TX 75602	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Douglas	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code Gladewater, TX 75647	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions)
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elara Caring Home Health	Amount of Contribution (\$) \$1,200.00
	Contributor address; City; State; Zip Code Longview, TX 75601	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elrod Legal Law Firm	Amount of Contribution (\$) \$1,250.00
	Contributor address; City; State; Zip Code Longview, TX 75605	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
(This section is for the Ethics Commission's use only)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/11 Rpt: 9/22
2 FILER NAME Republican Women of Gregg County P.A.C.		3 Filer ID (Ethics Commission Filers) 00016015
4 Date 09/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Embark Care,LLC 6 Contributor address; City; State; Zip Code Paris, TX 75460	7 Amount of Contribution (\$) \$110.00
8 Principal occupation / Job title (See Instructions) Security		9 Employer (See Instructions) Trinity School
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabbiani, Miguel Contributor address; City; State; Zip Code Longview, TX 75606	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Account Executive		Employer (See Instructions) Elara Caring
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Sharon Contributor address; City; State; Zip Code Longview, TX 75601	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Freida Contributor address; City; State; Zip Code Longview, TX 75601	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Healing Hearts Home Care		Employer (See Instructions) N/A
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$580.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/11 Rpt: 10/22
2 FILER NAME Republican Women of Gregg County P.A.C.		3 Filer ID (Ethics Commission Filers) 00016015
4 Date 09/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holly, Nancy	7 Amount of Contribution (\$) \$125.00
	6 Contributor address; City; State; Zip Code Gladewater, TX 75647	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holly, Nancy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Gladewater, TX 75647	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoyle, Brian (Judge)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Tyler, TX 75703	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huggins, Cyndy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Longview, TX 75604	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRS Aviation	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Longview, TX 75603	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/11 Rpt: 11/22
2 FILER NAME Republican Women of Gregg County P.A.C.		3 Filer ID (Ethics Commission Filers) 00016015
4 Date 07/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Legend Oaks 6 Contributor address; City; State; Zip Code Gladewater, TX 75647	7 Amount of Contribution (\$) \$250.00
	8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longview Ambucs Contributor address; City; State; Zip Code Longview, TX 75606	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall Hospital Contributor address; City; State; Zip Code Marshall, TX 75670	Amount of Contribution (\$) \$750.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Brenda Contributor address; City; State; Zip Code Longview, TX 75605	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Homemaker none	
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Nathaniel (The Honorable) Contributor address; City; State; Zip Code Tyler, TX 75607	Amount of Contribution (\$) \$300.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Congressman Texas	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/11 Rpt: 12/22
2 FILER NAME Republican Women of Gregg County P.A.C.		3 Filer ID (Ethics Commission Filers) 00016015
4 Date 11/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Napier, Renea 6 Contributor address; City; State; Zip Code Kilgore, TX 75662	7 Amount of Contribution (\$) \$985.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Self
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Novy, Scott (Judge) Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$290.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Gregg County
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oceans Behavioral Hospital Contributor address; City; State; Zip Code Longview, TX 75605	Amount of Contribution (\$) \$1,330.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Qualls, Shirley Contributor address; City; State; Zip Code Hallsville, TX 75650	Amount of Contribution (\$) \$145.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhymes III, Wallace Contributor address; City; State; Zip Code Longview, TX 75608	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) President of Bank		Employer (See Instructions) Springhill Bank

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/11 Rpt: 13/22
2 FILER NAME Republican Women of Gregg County P.A.C.		3 Filer ID (Ethics Commission Filers) 00016015
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudolph, Darrin 6 Contributor address; City; State; Zip Code Longview, TX 75602	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Rudy's Transport
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slayden, Sonny Contributor address; City; State; Zip Code Hallsville, TX 75650	Amount of Contribution (\$) \$985.00
Principal occupation / Job title (See Instructions) Operations Spv		Employer (See Instructions) Self
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoudt, Bill (Judge) Contributor address; City; State; Zip Code longview, TX 75606	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) County Judge		Employer (See Instructions) Gregg County
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomason, David Contributor address; City; State; Zip Code Jacksonville, TX 75766	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) True North Contributor address; City; State; Zip Code Longview, TX 75608	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/11 Rpt: 14/22
2 FILER NAME Republican Women of Gregg County P.A.C.		3 Filer ID (Ethics Commission Filers) 00016015
4 Date 09/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urbaniak, Tonyia	7 Amount of Contribution (\$) \$95.00
	6 Contributor address; City; State; Zip Code Longview, TX 75602	
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#: _____) Verdeber, Mary Ann	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code Longview, TX 75604	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vineyard, Lisa	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Longview, TX 75604	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Bob (Dr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Longview, TX 75605	
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Self
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wuori, Gwen	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Longview, TX 75602	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 1/1 Rpt: 15/22</p>
<p>2 FILER NAME Republican Women of Gregg County P.A.C.</p>				<p>3 Filer ID (Ethics Commission Filers) 00016015</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				<p>\$ 2,590.00</p>
<p>5 Date 11/01/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Brad (Rev.)</p>			<p>8 Amount of contribution (\$) \$250.00</p>
	<p>7 Contributor address; City; State; Zip Code Kilgore, TX 75662</p>			<p>9 In-kind contribution description Horse Soldier Bourbon Gift Set Autographed</p>
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>				
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Pastor</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions) Church</p>		
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/01/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minute Men Arms</p>			<p>Amount of contribution (\$) \$1,500.00</p>
	<p>Contributor address; City; State; Zip Code Gilmer, TX 75647</p>			<p>In-kind contribution description Auction item - Custom Hand Built firearm</p>
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>				
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/01/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verdeber, Mary Ann</p>			<p>Amount of contribution (\$) \$700.00</p>
	<p>Contributor address; City; State; Zip Code Longview, TX 75604</p>			<p>In-kind contribution description Auction item - Exploring Heart of Texas</p>
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>				
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions) Retired</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/7 Rpt: 16/22	2 FILER NAME Republican Women of Gregg County P.A.C.	3 Filer ID (Ethics Commission Filers) 00016015
4 Date 09/04/2025	5 Payee name Ahle Printing	
6 Amount (\$) \$698.98	7 Payee address; City; State; Zip Code 108A E. South St. Longview, TX 75601	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Printing 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 for veterans event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/24/2025	Payee name Ahle Printing	
Amount (\$) \$338.51	Payee address; City; State; Zip Code 108A E. South St. Longview, TX 75601	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Printing 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 Veteran's Appreciation Programs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/04/2025	Payee name Anderson, Rhonda	
Amount (\$) \$100.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Longview, TX 75604	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gift expense for travel
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: 2/7 Rpt: 17/22	2 FILER NAME Republican Women of Gregg County P.A.C.	3 Filer ID (Ethics Commission Filers) 00016015
4 Date 10/01/2025	5 Payee name Dickey's Barbeque Pit	
6 Amount (\$) \$3,377.35	7 Payee address; City; 1903 W Loop 281 Longview, TX 75604	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/01/2025	Payee name Dickey's Barbeque Pit	
Amount (\$) \$5,255.09	Payee address; City; 1903 W Loop 281 Longview, TX 75604	State; Zip Code
<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 Veteran's event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/01/2025	Payee name Hobby Lobby	
Amount (\$) \$79.09	Payee address; City; 305 -A W Loop 281 Longview, TX 75605	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Material for fabric
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: 3/7 Rpt: 18/22	2 FILER NAME Republican Women of Gregg County P.A.C.	3 Filer ID (Ethics Commission Filers) 00016015
4 Date 08/20/2025	5 Payee name Jalapeno Tree	
6 Amount (\$) \$14.44	7 Payee address; City; State; Zip Code 508 N. Eastman Rd Longview, TX 75601	
<input type="checkbox"/> Expenditure from corporate funds	<p>(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p> <p><input type="checkbox"/> Check if Austin, TX, officeholder living expense</p> <p>Speakers lunch</p>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 07/25/2025	Payee name Liberty Lives Forever	
Amount (\$) \$1,354.85	Payee address; City; State; Zip Code 55 Spring Terrace Ct. St. Charles, MO 63303	
<input type="checkbox"/> Expenditure from corporate funds	<p>(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p> <p><input type="checkbox"/> Check if Austin, TX, officeholder living expense</p> <p>Constitutions for school kids</p>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/15/2025	Payee name Liberty Lives Forever	
Amount (\$) \$900.00	Payee address; City; State; Zip Code 55 Spring Terrace Ct. St. Charles, MO 63303	
<input type="checkbox"/> Expenditure from corporate funds	<p>(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p> <p><input type="checkbox"/> Check if Austin, TX, officeholder living expense</p> <p>Constitutions for school kids</p>	
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: 4/7 Rpt: 19/22	2 FILER NAME Republican Women of Gregg County P.A.C.	3 Filer ID (Ethics Commission Filers) 00016015
4 Date 10/28/2025	5 Payee name Longview News Journal	
6 Amount (\$) \$7.00	7 Payee address; City; 320 E. Methvin St. Longview, TX 75601	
<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 Newspapers to be signed by speaker
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/06/2025	Payee name Longview Public Library	
Amount (\$) \$50.00	Payee address; City; 222 W. Methvin Longview, TX 75601	
<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 See you at the library event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/02/2025	Payee name Maude Cobb Convention Center	
Amount (\$) \$2,857.75	Payee address; City; 100 Grand Blvd Longview, TX 75604	
<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 Veteran's Event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/7 Rpt: 20/22	2 FILER NAME Republican Women of Gregg County P.A.C.	3 Filer ID (Ethics Commission Filers) 00016015
4 Date 11/10/2025	5 Payee name Minutemen Manufacturing	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 2041 US Hwy 271 S Ste #1 Gilmer, TX 75645	
<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 M3 Charity Pistol for auction
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/01/2025	Payee name Summers, Will	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Laneville, TX 75667	
<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 Speaker for event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/03/2025	Payee name TFRW	
Amount (\$) \$50.60	Payee address; City; State; Zip Code 13740 N. Hwy 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
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: 6/7 Rpt: 21/22	2 FILER NAME Republican Women of Gregg County P.A.C.	3 Filer ID (Ethics Commission Filers) 00016015
4 Date 09/24/2025	5 Payee name TFRW	
6 Amount (\$) \$75.90	7 Payee address; City; State; Zip Code 13740 N. Hwy 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 Memberships
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name USHR Flag Sales	
Amount (\$) \$125.65	Payee address; City; State; Zip Code US Capitol Vistor Center Washington, DC 20510	
<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 Flags flown over capitol
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/11/2025	Payee name USPS	
Amount (\$) \$11.00	Payee address; City; State; Zip Code Downtown Longview, TX 75606	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Postage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps
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: 7/7 Rpt: 22/22	2 FILER NAME Republican Women of Gregg County P.A.C.	3 Filer ID (Ethics Commission Filers) 00016015
4 Date 11/25/2025	5 Payee name Wreaths Across America	
6 Amount (\$) \$510.00	7 Payee address; City; State; Zip Code P O Box 249 COLUMBIA Falls, ME 04623	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wreaths for graves
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/04/2025	Payee name Wuori, Gwen	
Amount (\$) \$125.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Longview, TX 75602	
<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 Legislative Day expenses
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held