

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) 00016322	2 Total pages filed: 60
3 COMMITTEE NAME Ector County Republican Women's Club			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/08/2026 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 14537 Odessa, TX 79768		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Julie NICKNAME LAST SUFFIX Adams		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 14537 Odessa, TX 79768		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 14537 Odessa, TX 79768		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (432) 664-3877		
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 03/03/2026	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Ector County Republican Women's Club	13 Filer ID (Ethics Commission Filers) 00016322
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 13,718.53
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 22,690.53
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. Julie Adams

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
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17 COMMITTEE NAME Ector County Republican Women's Club		18 Filer ID (Ethics Commission Filers) 00016322
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 13,718.53
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 0.00
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 15,279.16
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: 1/45 Rpt: 4/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMONETT, ASHLEIGH <hr/> 6 Contributor address; City; State; Zip Code ODESSA, TX 79762	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) ASSISTANT EX. DIRECTOR		9 Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMONETT, ASHLEIGH <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) ASSISTANT EX. DIRECTOR		Employer (See Instructions)
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMONETT, ASHLEIGH <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) ASSISTANT EX. DIRECTOR		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMONETT, ASHLEIGH <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ASSISTANT EX. DIRECTOR		Employer (See Instructions)
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARANDA, GABRIELA <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79763	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/45 Rpt: 5/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Patti (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79765	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Patti (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JAN <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$73.36
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber, Gregory (Mr.) <hr/> Contributor address; City; State; Zip Code Gardendale, TX 79758	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) County Attorney		Employer (See Instructions) Ector County
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber, Gregory (Mr.) <hr/> Contributor address; City; State; Zip Code Gardendale, TX 79758	Amount of Contribution (\$) \$127.10
Principal occupation / Job title (See Instructions) County Attorney		Employer (See Instructions) Ector County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/45 Rpt: 6/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber, Gregory (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Gardendale, TX 79758	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) County Attorney		9 Employer (See Instructions) Ector County
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber, Gregory (Mr.) <hr/> Contributor address; City; State; Zip Code Gardendale, TX 79758	Amount of Contribution (\$) \$31.02
Principal occupation / Job title (See Instructions) County Attorney		Employer (See Instructions) Ector County
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber, Gregory (Mr.) <hr/> Contributor address; City; State; Zip Code Gardendale, TX 79758	Amount of Contribution (\$) \$31.02
Principal occupation / Job title (See Instructions) County Attorney		Employer (See Instructions) Ector County
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bird, Alma (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Melissa (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$38.54
Principal occupation / Job title (See Instructions) Mortgage Loan Officer		Employer (See Instructions) Bank

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/45 Rpt: 7/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 10/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonifay, Cathy <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79761	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonifay, Cathy <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, B.J. (Miss) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) Private Practice
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, B.J. (Miss) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) Private Practice
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, SHELLY <hr/> Contributor address; City; State; Zip Code GARDENDALE, TX 79758	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BDD		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/45 Rpt: 8/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 12/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAUDLE, CRAIG <hr/> 6 Contributor address; City; State; Zip Code ODESSA, TX 79761	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CHEMICAL TECH		9 Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calloway, CHARLES (Mr.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calloway, Judy (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calloway, Judy (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Sheri <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/45 Rpt: 9/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft, Lanell (Mrs.) 6 Contributor address; City; State; Zip Code Odessa, TX 79764	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft, Lanell (Mrs.) Contributor address; City; State; Zip Code Odessa, TX 79764	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft, Lanell (Mrs.) Contributor address; City; State; Zip Code Odessa, TX 79764	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft, Lanell (Mrs.) Contributor address; City; State; Zip Code Odessa, TX 79764	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronk, Carolyn Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Cosmetics Owner		Employer (See Instructions) Merle Norman

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/45 Rpt: 10/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronk, Carolyn <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79765	7 Amount of Contribution (\$) \$36.53
8 Principal occupation / Job title (See Instructions) Cosmetics Owner		9 Employer (See Instructions) Merle Norman
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronk, Carolyn <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Cosmetics Owner		Employer (See Instructions) Merle Norman
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crutcher, Linda (Mrs.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79765	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crutcher, Linda (Mrs.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79765	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crutcher, Lori (Mrs.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/45 Rpt: 11/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 11/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darville, Mark (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79798	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) business owner		9 Employer (See Instructions) Darville Co
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Pat (Mr.) <hr/> Contributor address; City; State; Zip Code Midland, TX 79702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Interior Designer		Employer (See Instructions) Self employed
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrick, Donna <hr/> Contributor address; City; State; Zip Code Odessa, TX 79764	Amount of Contribution (\$) \$95.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrick, Donna <hr/> Contributor address; City; State; Zip Code Odessa, TX 79764	Amount of Contribution (\$) \$63.40
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrick, Donna <hr/> Contributor address; City; State; Zip Code Odessa, TX 79764	Amount of Contribution (\$) \$63.40
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: 9/45 Rpt: 12/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 12/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etheridge, Gail (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79762	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etheridge, Gail (Ms.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faubel, Paul (Mr.) <hr/> Contributor address; City; State; Zip Code Midland, TX 79707	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Oil Company
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Sherry (Mrs.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761-0000	Amount of Contribution (\$) \$127.10
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Sherry (Mrs.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761-0000	Amount of Contribution (\$) \$95.25
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/45 Rpt: 13/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Sherry (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code ODESSA, TX 79761-0000	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions)
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALVAN, LUIS <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79766	Amount of Contribution (\$) \$38.81
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions)
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, BROOKE <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) OPERATIONS MANAGER		Employer (See Instructions)
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, BROOKE <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) OPERATIONS MANAGER		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerber, Loretta <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/45 Rpt: 14/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 09/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Melissa <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79764	7 Amount of Contribution (\$) \$38.81
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions)
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Melissa <hr/> Contributor address; City; State; Zip Code Odessa, TX 79764	Amount of Contribution (\$) \$38.81
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregston, Traci (Ms.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761-0000	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Barber		Employer (See Instructions)
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregston, Traci (Ms.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761-0000	Amount of Contribution (\$) \$62.19
Principal occupation / Job title (See Instructions) Barber		Employer (See Instructions)
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregston, Traci (Ms.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761-0000	Amount of Contribution (\$) \$63.40
Principal occupation / Job title (See Instructions) Barber		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/45 Rpt: 15/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 12/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Taylor <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79765	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) self employed
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, LINDA <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79764	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) INSURANCE BROKER		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKINS, Grayson <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKINS, KEN <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79705	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) REP. SPARKS		Employer (See Instructions)
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKINS, KEN <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79705	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) REP. SPARKS		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/45 Rpt: 16/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKINS, KEN <hr/> 6 Contributor address; City; State; Zip Code MIDLAND, TX 79705	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) REP. SPARKS		9 Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYS, DWAYNE <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79764	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BUILDING INSPECTOR		Employer (See Instructions)
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, ELIZABETH <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$63.40
Principal occupation / Job title (See Instructions) GRANT WRITER		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICK, AMY <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICK, CAL <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/45 Rpt: 17/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 10/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, KLATA <hr/> 6 Contributor address; City; State; Zip Code ODESSA, TX 79762	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) ACCOUNT MGR		9 Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, KLATA <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) ACCOUNT MGR		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWELL, JANEL <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79763	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danora (Mrs.) <hr/> Contributor address; City; State; Zip Code Gardendale, TX 79758	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danora (Mrs.) <hr/> Contributor address; City; State; Zip Code Gardendale, TX 79758	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/45 Rpt: 18/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danora (Mrs.) 6 Contributor address; City; State; Zip Code Gardendale, TX 79758	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danora (Mrs.) Contributor address; City; State; Zip Code Gardendale, TX 79758	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danora (Mrs.) Contributor address; City; State; Zip Code Gardendale, TX 79758	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danora (Mrs.) Contributor address; City; State; Zip Code Gardendale, TX 79758	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danora (Mrs.) Contributor address; City; State; Zip Code Gardendale, TX 79758	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/45 Rpt: 19/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Tammy 6 Contributor address; City; State; Zip Code Odessa, TX 79762	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) School Board		9 Employer (See Instructions) Self Employes
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Tammy Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) School Board		Employer (See Instructions) Self Employes
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Tammy Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) School Board		Employer (See Instructions) Self Employes
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Tammy Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) School Board		Employer (See Instructions) Self Employes
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Tammy Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) School Board		Employer (See Instructions) Self Employes

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/45 Rpt: 20/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Judith (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79761	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Self Employed
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynie, Sonya (Ms.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self employed
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynie, Sonya (Ms.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self employed
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynie, Sonya (Ms.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self employed
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hays, Debi (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79764-1203	Amount of Contribution (\$) \$38.81
Principal occupation / Job title (See Instructions) County Judge		Employer (See Instructions) Ector County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/45 Rpt: 21/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 12/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hays, Debi (Mrs.) 6 Contributor address; City; State; Zip Code Odessa, TX 79764-1203	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) County Judge		9 Employer (See Instructions) Ector County
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Brooke (Ms.) Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ector Co DA Office
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Brooke (Ms.) Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$38.81
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ector Co DA Office
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Brooke (Ms.) Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$38.81
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ector Co DA Office
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Sharon Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/45 Rpt: 22/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 11/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Sharon <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79762	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Sharon <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Sharon <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinojos, Erica (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79764	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Housewife		Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hood , Karen (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) County Tax Assessor		Employer (See Instructions) Midland County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/45 Rpt: 23/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurt, Sherry (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79711	7 Amount of Contribution (\$) \$127.10
8 Principal occupation / Job title (See Instructions) homemaker		9 Employer (See Instructions) none
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES, STACEY <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions)
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GARY <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, LAURIE <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NON-PROFIT EXECUTIVE		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, REBECCA <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79764	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/45 Rpt: 24/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 10/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, SUSAN <hr/> 6 Contributor address; City; State; Zip Code ODESSA, TX 79761	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) ACCT MGR		9 Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, SUSAN <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$68.38
Principal occupation / Job title (See Instructions) ACCT MGR		Employer (See Instructions)
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, SUSAN <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) ACCT MGR		Employer (See Instructions)
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, SUSAN <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) ACCT MGR		Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Louis (Mr.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79763	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/45 Rpt: 25/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 12/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Sheryl (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79762	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones , Tammy L (Ms.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) ECISD
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julian, Deborah <hr/> Contributor address; City; State; Zip Code Midland, TX 79710	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Anderson Homes
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, Christy <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79765	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelm, Donna (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/45 Rpt: 26/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimbrell, Pam (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code ODESSA, TX 79762	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACY, RHONDA <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79705	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACY, RHONDA <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79705	Amount of Contribution (\$) \$31.02
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARSON, MACKENZIE <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ASSOCIATE		Employer (See Instructions)
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEONARD, VALARIE <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$95.25
Principal occupation / Job title (See Instructions) CONTROLLER		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/45 Rpt: 27/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 09/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, RONNIE <hr/> 6 Contributor address; City; State; Zip Code ODESSA, TX 79762	7 Amount of Contribution (\$) \$77.77
8 Principal occupation / Job title (See Instructions) RANCHER		9 Employer (See Instructions)
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, RONNIE <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$93.35
Principal occupation / Job title (See Instructions) RANCHER		Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, TRYON (Mr.) <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79763	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Law Firm Partner
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGAN, BECKY HEALD <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landgraf, John (Mr.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761-3429	Amount of Contribution (\$) \$95.25
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/45 Rpt: 28/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewallen, David <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79762	7 Amount of Contribution (\$) \$38.54
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Trudy (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79763	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lively, Melanie <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Adminstrator Medical Practice		Employer (See Instructions) Dr Charles Lively
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTEL, ANITA <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYLONE, SAVANNAH <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79707	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/45 Rpt: 29/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 10/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYLONE, SAVANNAH <hr/> 6 Contributor address; City; State; Zip Code MIDLAND, TX 79707	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions)
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOBLEY, TINA <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) FINANCIAL ADVISOR		Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOBLEY, TINA <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) FINANCIAL ADVISOR		Employer (See Instructions)
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTES, JESSICA <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79765	Amount of Contribution (\$) \$63.40
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions)
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTES, JESSICA <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79765	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/45 Rpt: 30/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 11/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTES, JESSICA <hr/> 6 Contributor address; City; State; Zip Code ODESSA, TX 79765	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) OFFICE MANAGER		9 Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTES, JESSICA <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79765	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions)
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malliat, Dave <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauldin, Monica <hr/> Contributor address; City; State; Zip Code Midland, TX 79706	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Diann (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$63.40
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/45 Rpt: 31/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 10/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Diann (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79762	7 Amount of Contribution (\$) \$63.40
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions)
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeese, Deneisa <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$77.77
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jill <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Odessa Housing Authorities
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jill (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$38.81
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Odessa Housing FINANCE
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jill (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Odessa Housing FINANCE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/45 Rpt: 32/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 09/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jill (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79765	7 Amount of Contribution (\$) \$62.19
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Odessa Housing FINANCE
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jill (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$30.73
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Odessa Housing FINANCE
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jill (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Odessa Housing FINANCE
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jill (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Odessa Housing FINANCE
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jill (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Odessa Housing FINANCE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/45 Rpt: 33/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jill (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79765	7 Amount of Contribution (\$) \$33.96
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Odessa Housing FINANCE
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mock, Sandra <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$38.81
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mock, Sandra <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nabarrette, Jaye (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Administrative Asst.		Employer (See Instructions) Wood Foundation
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Vicki <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$31.55
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: 31/45 Rpt: 34/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 11/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naverrette, Guadalupe <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79766	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) Ector County District Clerk		9 Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naverrette, Guadalupe <hr/> Contributor address; City; State; Zip Code Odessa, TX 79766	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Ector County District Clerk		Employer (See Instructions)
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Brenda (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Brenda (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$31.02
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Brenda (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/45 Rpt: 35/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 12/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Brenda (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79762	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Brenda (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nyborg, William (Mr.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$63.40
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nyborg, William (Mr.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$63.40
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nyborg, William (Mr.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/45 Rpt: 36/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peden, Deanna <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79765	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions)
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Richard (Mr.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$63.40
Principal occupation / Job title (See Instructions) Plumber		Employer (See Instructions) Service Master
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Richard (Mr.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Plumber		Employer (See Instructions) Service Master
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Richard (Mr.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$63.40
Principal occupation / Job title (See Instructions) Plumber		Employer (See Instructions) Service Master
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Candy (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) MCH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/45 Rpt: 37/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Candy (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79761	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) Registered Nurse		9 Employer (See Instructions) MCH
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Provance, Robin (Ms.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79763	Amount of Contribution (\$) \$36.53
Principal occupation / Job title (See Instructions) HR Director		Employer (See Instructions) Oil Services
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, ANNETTE <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, ANNETTE <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYES, ELFREDA (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$63.40
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/45 Rpt: 38/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 11/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHODES, TOMMY <hr/> 6 Contributor address; City; State; Zip Code ODESSA, TX 79762	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rayny, Hagan <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	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#: _____) Rhodes, Betsy (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Treasurer		Employer (See Instructions) Metal Specialties Inc
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Nancy (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Edith (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Business Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/45 Rpt: 39/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 09/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Edith (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79765	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) Office Manager		9 Employer (See Instructions) Business Owner
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Edith (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Business Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Edith (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Business Owner
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUSTER, JENNIFER <hr/> Contributor address; City; State; Zip Code MAPLE GROVE, MN 55369	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions)
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, LAURIE <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79765	Amount of Contribution (\$) \$31.55
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: 37/45 Rpt: 40/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MARY <hr/> 6 Contributor address; City; State; Zip Code ODESSA, TX 79762	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)

Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MARY <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MARY <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MARY <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRADLEY, MARGARET <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79762	Amount of Contribution (\$) \$63.40
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/45 Rpt: 41/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seglem, Marian (Ms.) <hr style="border-top: 1px dotted black;"/> 6 Contributor address; City; State; Zip Code Odessa, TX 79761	7 Amount of Contribution (\$) \$63.40
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seglem, Marian (Ms.) <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$63.40
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seglem, Marian (Ms.) <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$63.40
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seglem, Marian (Ms.) <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$63.40
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seglem, Marian (Ms.) <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/45 Rpt: 42/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 07/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Jeraldine <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79706	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sisnega, Lucy <hr/> Contributor address; City; State; Zip Code Midland, TX 79707	Amount of Contribution (\$) \$36.53
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Commercial Real Estate
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sisneiga, Lucy (Ms.) <hr/> Contributor address; City; State; Zip Code Midland, TX 79707	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Commercial Real Estate		Employer (See Instructions) Real Estate Co
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slape, Shari (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79764	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Hughes Hot Shot Oilfield Srv.
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slape, Shari (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79764	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Hughes Hot Shot Oilfield Srv.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/45 Rpt: 43/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smoot, Jonna (Miss) <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79765	7 Amount of Contribution (\$) \$36.53
8 Principal occupation / Job title (See Instructions) Marketing Director		9 Employer (See Instructions) West TX National Bank
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Marilyn (Mrs.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79763	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Payroll/Collections		Employer (See Instructions) Hughes Hot Shot Oilfield Srv.
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, V.J. (Mr.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79763	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solley, Kole <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Jill <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/45 Rpt: 44/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Kevin <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79705	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Business Owner/Politician		9 Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson, Jim <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talley, Dawнна <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Ector Co ISD
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Carol <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Carol <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$31.55
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: 42/45 Rpt: 45/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walden, Melissa <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79761	7 Amount of Contribution (\$) \$63.40
8 Principal occupation / Job title (See Instructions) Justice of the Peace		9 Employer (See Instructions)
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walden, Melissa <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions)
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walden, Melissa <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welling, Tonny <hr/> Contributor address; City; State; Zip Code Odessa, TX 79760	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Donal (Mr.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/45 Rpt: 46/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Kortney (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code odessa, TX 79765	7 Amount of Contribution (\$) \$38.54
8 Principal occupation / Job title (See Instructions) Housewife		9 Employer (See Instructions)
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Kortney (Mrs.) <hr/> Contributor address; City; State; Zip Code odessa, TX 79765	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Housewife		Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Paula (Ms.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$63.40
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Paula (Ms.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Paula (Ms.) <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$31.55
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: 44/45 Rpt: 47/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 12/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Paula (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79762	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingo, Ed <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wise, Jim (Mr.) <hr/> Contributor address; City; State; Zip Code Midland, TX 79707	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wise, Kathryn (Mrs.) <hr/> Contributor address; City; State; Zip Code Midland, TX 79707	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Kathleen (Mrs.) <hr/> Contributor address; City; State; Zip Code Midland, TX 79707	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/45 Rpt: 48/60
2 FILER NAME Ector County Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00016322
4 Date 08/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) clark, christopher (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79761	7 Amount of Contribution (\$) \$36.53
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Ector County District Court

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 49/60

2 FILER NAME

Ector County Republican Women's Club

3 Filer ID (Ethics Commission Filers)
00016322

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
Sch: 1/1 Rpt: 50/60

2 FILER NAME
Ector County Republican Women's Club

3 Filer ID (Ethics Commission Filers)
00016322

4 TOTAL OF UNITEMIZED LOANS

\$ 0.00

5 Date of loan

7 Name of lender ☐ out-of-state PAC (ID#: _____)

9 Loan Amount (\$)

6 Is lender a
financial
institution?

8 Lender address; City; State; Zip Code

10 Interest Rate

11 Maturity Date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

☐ None

15 Check if personal funds were deposited into political account
(See Instructions)

☐

16 GUARANTOR
INFORMATION

☐ not applicable

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

20 Principal occupation

21 Employer (See Instructions)

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/10 Rpt:	2 FILER NAME Ector County Republican Women's Club	3 Filer ID (Ethics Commission Filers) 00016322
4 Date 09/17/2025	5 Payee name A-1 Sign Engravers INC	
6 Amount (\$) 200.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip P O Box 2641 Midland, TX 79702	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) TFRW AWARD
Date 09/09/2025	Payee name Armic Systems	
Amount (\$) 129.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3405 Clearmont Ave Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Website Management	(b) Description (See instructions regarding type of information required.) Website Management
Date 07/01/2025	Payee name Armic Systems	
Amount (\$) 129.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3405 Clearmont Ave Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) WEBSITE MANAGEMENT
Date 08/01/2025	Payee name Armic Systems	
Amount (\$) 129.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3405 Clearmont Ave Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) WEBSITE MANAGEMENT

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/10 Rpt:	2 FILER NAME Ector County Republican Women's Club	3 Filer ID (Ethics Commission Filers) 00016322
4 Date 09/01/2025	5 Payee name Armic Systems	
6 Amount (\$) 129.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 3405 Clearmont Ave Odessa, TX 79762	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) WEBSITE MANAGEMENT
Date 10/01/2025	Payee name Armic Systems	
Amount (\$) 129.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3405 Clearmont Ave Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) WEBSITE MANAGEMENT
Date 11/01/2025	Payee name Armic Systems	
Amount (\$) 129.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3405 Clearmont Ave Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) WEBSITE MANAGEMENT
Date 11/19/2025	Payee name Calloway, Judy (Mrs.)	
Amount (\$) 195.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1305 Bonham odessa, TX 79761	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) NFRW Convention	(b) Description (See instructions regarding type of information required.) NFRW Convention

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/10 Rpt:	2 FILER NAME Ector County Republican Women's Club	3 Filer ID (Ethics Commission Filers) 00016322
4 Date 12/01/2025	5 Payee name Hays, Debi (Mrs.)	
6 Amount (\$) 195.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 9205 Bedford Odessa, TX 79764	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) NFRW CONVENTION	(b) Description (See instructions regarding type of information required.) NFRW CONVENTION
Date 11/18/2025	Payee name Homemade Wines	
Amount (\$) 809.97 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1541 JBS PARKWAY ODESSA, TX 79761	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) PATRON DEVELOPMENT
Date 10/22/2025	Payee name Kelm, Donna (Mrs.)	
Amount (\$) 300.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 25 Kingsland Court Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) NFRW Convention	(b) Description (See instructions regarding type of information required.) NFRW Convention
Date 08/25/2025	Payee name MCM Elegante	
Amount (\$) 2,175.80 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5200 E. University Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Food /Beverage

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 4/10 Rpt:	2 FILER NAME Ector County Republican Women's Club	3 Filer ID (Ethics Commission Filers) 00016322
4 Date 11/18/2025	5 Payee name MCM Elegante	
6 Amount (\$) 1,159.44 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 5200 E. University Odessa, TX 79762	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) MONTHLY LUNCHEONS
Date 11/24/2025	Payee name MCM Elegante	
Amount (\$) 1,426.92 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5200 E. University Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) MONTHLY LUNCHEONS
Date 10/03/2025	Payee name MCM Elegante	
Amount (\$) 1,700.16 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5200 E. University Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) MONTHLY LUNCHEONS
Date 10/21/2025	Payee name MCM Elegante	
Amount (\$) 1,728.21 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5200 E. University Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) MONTHLY LUNCHEONS

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 5/10 Rpt:	2 FILER NAME Ector County Republican Women's Club	3 Filer ID (Ethics Commission Filers) 00016322
4 Date 12/05/2025	5 Payee name Marah Rhoads	
6 Amount (\$) 650.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 3801 N Dixie Odessa, TX 79762	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Marah Rhoads
Date 07/21/2025	Payee name Quickbooks/Intuit Inc	
Amount (\$) 79.95 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2700 Coast Ave Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Quickbooks
Date 08/21/2025	Payee name Quickbooks/Intuit Inc	
Amount (\$) 79.95 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2700 Coast Ave Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Quickbooks
Date 09/21/2025	Payee name Quickbooks/Intuit Inc	
Amount (\$) 79.95 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2700 Coast Ave Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Quickbooks

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 6/10 Rpt:	2 FILER NAME Ector County Republican Women's Club	3 Filer ID (Ethics Commission Filers) 00016322
4 Date 10/21/2025	5 Payee name Quickbooks/Intuit Inc	
6 Amount (\$) 79.95 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 2700 Coast Ave Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Quickbooks
Date 11/21/2025	Payee name Quickbooks/Intuit Inc	
Amount (\$) 79.95 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2700 Coast Ave Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Quickbooks
Date 12/21/2025	Payee name Quickbooks/Intuit Inc	
Amount (\$) 79.95 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2700 Coast Ave Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Quickbooks
Date 07/15/2025	Payee name Squareup.com	
Amount (\$) 148.64 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 14500 FAA Blvd Suite 100 Ft Worth, TX 76155	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) SQUARE FEES

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 7/10 Rpt:	2 FILER NAME Ector County Republican Women's Club	3 Filer ID (Ethics Commission Filers) 00016322
4 Date 09/17/2025	5 Payee name TFRW	
6 Amount (\$) 101.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 13740 US-183 J4, Austin, TX 78750	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) ABC Leadership	(b) Description (See instructions regarding type of information required.) ABC Leadership
Date 12/30/2025	Payee name TFRW	
Amount (\$) 250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 US-183 J4, Austin, TX 78750	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) TFRW DUES
Date 12/30/2025	Payee name TFRW	
Amount (\$) 20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 US-183 J4, Austin, TX 78750	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) TFRW ANNUAL FEE
Date 12/30/2025	Payee name TFRW	
Amount (\$) 3.20 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 US-183 J4, Austin, TX 78750	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) TRANSACTION FEE

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 8/10 Rpt:	2 FILER NAME Ector County Republican Women's Club	3 Filer ID (Ethics Commission Filers) 00016322
4 Date 07/01/2025	5 Payee name Textedly App	
6 Amount (\$) 8.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 349 Fifth Ave New York, NY 10016	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Textedly
Date 08/01/2025	Payee name Textedly App	
Amount (\$) 8.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 349 Fifth Ave New York, NY 10016	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) TEXTEDLY
Date 08/19/2025	Payee name Textedly App	
Amount (\$) 31.92 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 349 Fifth Ave New York, NY 10016	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) TEXTEDLY
Date 09/01/2025	Payee name Textedly App	
Amount (\$) 8.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 349 Fifth Ave New York, NY 10016	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) TEXTEDLY

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 9/10 Rpt:	2 FILER NAME Ector County Republican Women's Club	3 Filer ID (Ethics Commission Filers) 00016322
4 Date 10/02/2025	5 Payee name Textedly App	
6 Amount (\$) 8.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 349 Fifth Ave New York, NY 10016	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) TEXTEDLY
Date 11/03/2025	Payee name Textedly App	
Amount (\$) 1,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 349 Fifth Ave New York, NY 10016	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) TEXTEDLY
Date 11/03/2025	Payee name Textedly App	
Amount (\$) 8.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 349 Fifth Ave New York, NY 10016	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) TEXTEDLY
Date 12/01/2025	Payee name Textedly App	
Amount (\$) 8.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 349 Fifth Ave New York, NY 10016	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) TEXTEDLY

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 10/10 Rpt:	2 FILER NAME Ector County Republican Women's Club	3 Filer ID (Ethics Commission Filers) 00016322
4 Date 07/11/2025	5 Payee name USPS	
6 Amount (\$) 382.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip East 52nd Street Odessa, TX 79768	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Printing Expense	(b) Description (See instructions regarding type of information required.) POSTAGE STAMPS
Date 12/01/2025	Payee name University of Permian Basin	
Amount (\$) 1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 4901 E. University Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) SCHOLARSHIP - LESLIE MORALES