

**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) 00016604	2 Total pages filed: 14		
3 COMMITTEE NAME Williamson County Republican Women - PAC		<b>OFFICE USE ONLY</b> Date Received <b>ELECTRONICALLY FILED</b> 01/12/2026  Date Hand-delivered or Date Postmarked  Receipt # <input type="text"/> Amount <input type="text"/>  Date Processed  Date Imaged			
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address P.O. Box 342  Round Rock, TX 78680					
5 CAMPAIGN TREASURER NAME	MS / MRS / MR  Pamela			MI	
	NICKNAME  Sherrin	SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);  3337 Rod Carew Drive  Round Rock, TX 78665	APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX;  3337 Rod Carew Drive  Round Rock, TX 78665	APT / SUITE #;	CITY;	STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE (210) 386-8880	PHONE NUMBER	EXTENSION		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15  <input type="checkbox"/> July 15	<input type="checkbox"/> 30th day before election  <input type="checkbox"/> 8th day before election  <input type="checkbox"/> Runoff	<input type="checkbox"/> Dissolution (Attach PAC-DR)  <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year 07/01/2025	Month Day Year THROUGH	Month Day Year 12/31/2025		
11 ELECTION	ELECTION DATE Month Day Year 03/03/2026	<input checked="" type="checkbox"/> Primary  <input type="checkbox"/> General	ELECTION TYPE  <input type="checkbox"/> Runoff  <input type="checkbox"/> Special	<input type="checkbox"/> Other	

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

**FORM GPAC  
COVER SHEET PG 2**

<b>12 COMMITTEE NAME</b> Williamson County Republican Women - PAC		<b>13 FILER ID</b> (Ethics Commission Filers) 00016604
<b>14 COMMITTEE ACTIVITY</b>  (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.)	
<b>15 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 1,700.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,858.79
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 3,630.56
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 6,642.77
<b>OUTSTANDING LOAN TOTALS</b>	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.

Pamela Sherrin

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
3 of 14

<b>17 COMMITTEE NAME</b> Williamson County Republican Women - PAC	<b>18 FILER ID</b> (Ethics Commission Filers) 00016604
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	
6. <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	
7. <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	
8. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	
9. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	
10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
11. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
12. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
13. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/3 Rpt: 4/14
<b>2</b> FILER NAME Williamson County Republican Women - PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00016604
<b>4</b> Date 09/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bill Fairbrother campaign	<b>7</b> Amount of Contribution (\$) \$750.00
	<b>6</b> Contributor address; City; State; Zip Code  Round Rock, TX 78665	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandy Halford campaign	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  Georgetown, TX 78626	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchert, Carol	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  Round Rock, TX 78665	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caroline Harris-Davila campaign	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Round Rock, TX 78680	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christie Craddock campaign	Amount of Contribution (\$) \$750.00
	Contributor address; City; State; Zip Code  Austin, TX 78703	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/3 Rpt: 5/14
<b>2</b> FILER NAME Williamson County Republican Women - PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00016604
<b>4</b> Date 09/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harwig, Monica	<b>7</b> Amount of Contribution (\$) \$750.00
	<b>6</b> Contributor address; City; State; Zip Code  Round Rock, TX 78681	
<b>8</b> Principal occupation / Job title (See Instructions) Analyst		<b>9</b> Employer (See Instructions) TX Education Agency
<b>Date</b> 10/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, Dee	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  Hutto, TX 78634	
<b>Principal occupation / Job title (See Instructions)</b> County Attorney		<b>Employer (See Instructions)</b> Williamson County, TX
<b>Date</b> 09/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lesli Fitzpatrick campaign	<b>Amount of Contribution (\$)</b> \$300.00
	<b>Contributor address; City; State; Zip Code</b>  Austin, TX 78717	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuinness, Patrick	<b>Amount of Contribution (\$)</b> \$300.00
	<b>Contributor address; City; State; Zip Code</b>  Georgetown, TX 78628	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 09/15/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Senator Charles Schwertner	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  Georgetown, TX 78627	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule A1: Sch: 3/3 Rpt: 6/14</p>
<p><b>2</b> FILER NAME Williamson County Republican Women - PAC</p>		<p><b>3</b> Filer ID (Ethics Commission Filers) 00016604</p>
<p><b>4</b> Date 12/12/2025</p>	<p><b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry M. Wilson campaign ..... <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78768</p>	<p><b>7</b> Amount of Contribution (\$) \$500.00</p>
<p><b>8</b> Principal occupation / Job title (See Instructions)</p>		<p><b>9</b> Employer (See Instructions)</p>
<p>Date 10/09/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson County GOP ..... Contributor address; City; State; Zip Code  Georgetown, TX 78626</p>	<p>Amount of Contribution (\$) \$300.00</p>
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>
<p>Date 12/12/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson County GOP ..... Contributor address; City; State; Zip Code  Georgetown, TX 78626</p>	<p>Amount of Contribution (\$) \$250.00</p>
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule A2: Sch: 1/1 Rpt: 7/14</p>
<p><b>2</b> FILER NAME Williamson County Republican Women - PAC</p>		<p><b>3</b> Filer ID (Ethics Commission Filers) 00016604</p>
<p><b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p><b>\$</b></p>
<p><b>5</b> Date 10/18/2025</p>	<p><b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Sherrin, Pamela</p>	<p><b>8</b> Amount of contribution (\$) \$158.79</p> <p><b>9</b> In-kind contribution description Stationary, envelopes, and supplies for Fundraiser Event</p>
<p><b>7</b> Contributor address; City; State; Zip Code  ROUND ROCK, TX 78665-2385</p>		
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>		
<p><b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Financial Examiner</p>		<p><b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) TX HHSC</p>
<p><b>12</b> Contributor's principal occupation (FOR JUDICIAL)</p>		<p><b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p><b>14</b> Contributor's employer/law firm (FOR JUDICIAL)</p>		<p><b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p><b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		

**PLEDGED CONTRIBUTIONS****SCHEDULE B**

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

**LOANS****SCHEDULE E**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 9/14
<b>2</b> FILER NAME Williamson County Republican Women - PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00016604
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$ 0.00
<b>5</b> Date of loan	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	<b>9</b> Loan Amount (\$)
<b>6</b> Is lender a financial institution?	<b>8</b> Lender address; City; State; Zip Code	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions)		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral <input type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account <input type="checkbox"/> (See Instructions)
<b>16</b> GUARANTOR INFORMATION <input type="checkbox"/> not applicable	<b>17</b> Name of guarantor ..... <b>18</b> Guarantor address; City; State; Zip Code	<b>19</b> Amount Guaranteed (\$)
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 10/14	2 FILER NAME Williamson County Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00016604
4 Date 09/22/2025	5 Payee name AS Awards	
6 Amount (\$) \$12.67	7 Payee address; City; State; Zip Code 3246 Corrigan Lane  Round Rock, TX 78665	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name tags
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/01/2025	Payee name Constant Contact	
Amount (\$) \$36.24	Payee address; City; State; Zip Code 1601 Trapelo Road  Waltham, MA 02451	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newsletter
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/01/2025	Payee name Constant Contact	
Amount (\$) \$36.24	Payee address; City; State; Zip Code 1601 Trapelo Road  Waltham, MA 02451	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newsletter
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/5 Rpt: 11/14	2 FILER NAME Williamson County Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00016604
4 Date 09/01/2025	5 Payee name Constant Contact	
6 Amount (\$) \$36.24	7 Payee address; City; 1601 Trapelo Road  Waltham, MA 02451	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newsletter
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/01/2025	Payee name Constant Contact	
Amount (\$) \$36.24	Payee address; City; 1601 Trapelo Road  Waltham, MA 02451	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newsletter
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name Constant Contact	
Amount (\$) \$36.24	Payee address; City; 1601 Trapelo Road  Waltham, MA 02451	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newsletter
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/5 Rpt: 12/14	2 FILER NAME Williamson County Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00016604
4 Date 12/01/2025	5 Payee name Constant Contact	
6 Amount (\$) \$36.24	7 Payee address; City; 1601 Trapelo Road  Waltham, MA 02451	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newsletter
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/24/2025	Payee name Harwig, Monica	
Amount (\$) \$493.00	Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b>  Round Rock, TX 78681	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name LJ Workstations	
Amount (\$) \$297.69	Payee address; City; State; Zip Code  801 W. 2nd Street  Taylor, TX 76574	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent Chairs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/5 Rpt: 13/14	2 FILER NAME Williamson County Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00016604
4 Date 11/14/2025	5 Payee name Sherrin, Pamela	
6 Amount (\$) \$214.00	7 Payee address; City; State; Zip Code <b>REDACTED PER 254.0401, ELEC. CODE</b> Round Rock, TX 78665	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tablecloths and decorations
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name Square, Inc	
Amount (\$) \$1.90	Payee address; City; State; Zip Code 1455 Market Street  San Francisco, CA 94103-1331	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CC fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/14/2025	Payee name Square, Inc	
Amount (\$) \$2.76	Payee address; City; State; Zip Code 1455 Market Street  San Francisco, CA 94103-1331	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CC fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 14/14	2 FILER NAME Williamson County Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00016604
4 Date 12/01/2025	5 Payee name Williamson County GOP	
6 Amount (\$) \$2,000.00	7 Payee address; City; P.O. Box 393  Georgetown, TX 78680	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase table at event.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/20/2025	Payee name Wingate Inn	
Amount (\$) \$391.10	Payee address; City; 1209 North IH 35 North  Round Rock, TX 78664	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Room for the speaker
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held