

**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) 00067538	2 Total pages filed: 13		
3 COMMITTEE NAME Grimes County Republican Women		<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 10114 County Road 314  Navasota, TX 77868					
5 CAMPAIGN TREASURER NAME	MS / MRS / MR  Dianna			MI	
	NICKNAME  LAST Westmoreland	SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);  10114 CR 314  Navasota, TX 77868	APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX;  10114 CR 314  Navasota, TX 77868	APT / SUITE #;	CITY;	STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE (713) 254-5470	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 01/12/2026	<input type="checkbox"/> Primary  <input type="checkbox"/> General	<input type="checkbox"/> Runoff  <input type="checkbox"/> Special	<input checked="" type="checkbox"/> Other  no election-6 mo / year end	

**GO TO PAGE 2**

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

**FORM GPAC  
COVER SHEET PG 2**

<b>12 COMMITTEE NAME</b> Grimes County Republican Women		<b>13 FILER ID</b> (Ethics Commission Filers) 00067538
<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	\$ 18,082.45
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 32,423.45
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 1,579.65
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 13,364.37
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 28,152.60
<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.

Dianna Westmoreland

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 13

<b>17</b> COMMITTEE NAME Grimes County Republican Women	<b>18</b> FILER ID (Ethics Commission Filers) 00067538
<b>19</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 32,423.45	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS \$	
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
6. <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
7. <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
8. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
9. <input type="checkbox"/> SCHEDULE E: LOANS \$	
10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 13,364.37	
11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$	
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/5 Rpt: 4/13
<b>2</b> FILER NAME Grimes County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00067538
<b>4</b> Date 09/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agan, Dan	<b>7</b> Amount of Contribution (\$) \$1,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Anderson, TX 77830	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) none
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks Braylee	Amount of Contribution (\$) \$1,055.00
	Contributor address; City; State; Zip Code  Navasota, TX 77868	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estes, Eric	Amount of Contribution (\$) \$1,100.00
	Contributor address; City; State; Zip Code  Magnolia, TX 77353	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fauth, Sherry	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Plantersville, TX 77363	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fauth, Sherry	Amount of Contribution (\$) \$220.00
	Contributor address; City; State; Zip Code  Plantersville, TX 77363	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/5 Rpt: 5/13
<b>2</b> FILER NAME Grimes County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00067538
<b>4</b> Date 11/30/2025	<b>5</b> Full name of contributor Francines Pavillion	<b>7</b> Amount of Contribution (\$) \$270.00
	<b>6</b> Contributor address; City; State; Zip Code  Iola, TX 77861	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 07/16/2025	Full name of contributor GCRP	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code  Anderson, TX 77830	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/19/2025	Full name of contributor GCRP	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Anderson, TX 77830	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/19/2025	Full name of contributor GCRW - August luncheon	Amount of Contribution (\$) \$372.00
	Contributor address; City; State; Zip Code  Plantersville, TX 77363	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2025	Full name of contributor GCRW -memberships	Amount of Contribution (\$) \$860.00
	Contributor address; City; State; Zip Code  Plantersville, TX 77363	
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: 3/5 Rpt: 6/13
<b>2</b> FILER NAME Grimes County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00067538
<b>4</b> Date 10/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GCRW -memberships .....  <b>6</b> Contributor address; City; State; Zip Code  Plantersville, TX 77363	<b>7</b> Amount of Contribution (\$)  \$385.00
	<b>8</b> Principal occupation / Job title (See Instructions) <b>9</b> Employer (See Instructions)	
<b>Date</b> 12/29/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) GCRW -memberships .....  <b>Contributor address; City; State; Zip Code</b>  Plantersville, TX 77363	<b>Amount of Contribution (\$)</b>  \$380.00
	<b>Principal occupation / Job title (See Instructions)</b> <b>Employer (See Instructions)</b>	
<b>Date</b> 08/05/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) GCRW Gun Show contributions .....  <b>Contributor address; City; State; Zip Code</b>  Plantersville, TX 77363	<b>Amount of Contribution (\$)</b>  \$365.00
	<b>Principal occupation / Job title (See Instructions)</b> <b>Employer (See Instructions)</b>	
<b>Date</b> 07/16/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) GCRW July Luncheon .....  <b>Contributor address; City; State; Zip Code</b>  Plantersville, TX 77363	<b>Amount of Contribution (\$)</b>  \$389.00
	<b>Principal occupation / Job title (See Instructions)</b> <b>Employer (See Instructions)</b>	
<b>Date</b> 12/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) GCRW Sept luncheon .....  <b>Contributor address; City; State; Zip Code</b>  Plantersville, TX 77363	<b>Amount of Contribution (\$)</b>  \$465.00
	<b>Principal occupation / Job title (See Instructions)</b> <b>Employer (See Instructions)</b>	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/5 Rpt: 7/13
<b>2</b> FILER NAME Grimes County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00067538
<b>4</b> Date 10/06/2025	<b>5</b> Full name of contributor Guild, Joan	<b>7</b> Amount of Contribution (\$) \$280.00
	<b>6</b> Contributor address; City; State; Zip Code  Calvert, TX 77837	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) none
Date 09/19/2025	Full name of contributor Hector, Tina	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Iola, TX 77861	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 10/06/2025	Full name of contributor Paskett, Darryl	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Anderson, TX 77830	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 09/19/2025	Full name of contributor Stephens, Wes	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  Shenandoah, TX 77385	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 09/19/2025	Full name of contributor Tartiff, Cheryl	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Navasota, TX 77868	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 5/5 Rpt: 8/13
<b>2</b> FILER NAME Grimes County Republican Women			<b>3</b> Filer ID (Ethics Commission Filers) 00067538
<b>4</b> Date 10/06/2025	<b>5</b> Full name of contributor Walkoviak, Sidney ..... <b>6</b> Contributor address; City; State; Zip Code  Anderson, TX 77830	<b>7</b> Amount of Contribution (\$)  \$650.00	
<b>8</b> Principal occupation / Job title (See Instructions) self employed - hay		<b>9</b> Employer (See Instructions) Self	
<b>Date</b> 09/19/2025	<b>Full name of contributor</b> Williams, Karen ..... <b>Contributor address; City; State; Zip Code</b>  Navasota, TX 77868	<b>Amount of Contribution (\$)</b>  \$1,000.00	
Principal occupation / Job title (See Instructions) Sales Mgr		Employer (See Instructions) VS America	

# 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: 9/13	2 FILER NAME Grimes County Republican Women	3 Filer ID (Ethics Commission Filers) 00067538
4 Date 10/09/2025	5 Payee name ASCID	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 458 FM 149 W  Anderson, TX 77830	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to local school board fund raiser
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/04/2025	Payee name Clark, Jennifer	
Amount (\$) \$272.89	Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b>  Iola, TX 77861	
<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 Reimbursement for desserts for fund raiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name Fauth, Sherry	
Amount (\$) \$1,183.40	Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b>  Plantersville, TX 77363	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Reimbursement for books to donate to schools-Constitution Day	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Constitution Day books - reimburse for purchase
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: 10/13	2 FILER NAME Grimes County Republican Women	3 Filer ID (Ethics Commission Filers) 00067538
4 Date 08/15/2025	5 Payee name Francines	
6 Amount (\$) \$1,277.63	7 Payee address; City; State; Zip Code 21155 CR 124  Iola, TX 77861	
<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 Venue rent for fund raiser
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name Hector, Tina	
Amount (\$) \$259.89	Payee address; City; State; Zip Code 12124 CR 175  Iola, TX 77881	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing & postage for postcards for fund raiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/21/2025	Payee name Hector, Tina	
Amount (\$) \$403.25	Payee address; City; State; Zip Code 12124 CR 175  Iola, TX 77881	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brochures
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: 11/13	2 FILER NAME Grimes County Republican Women	3 Filer ID (Ethics Commission Filers) 00067538
4 Date 10/04/2025	5 Payee name Jacobs, Kathie	
6 Amount (\$) \$256.20	7 Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b>  Plantersville, TX 77363	
<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 Reimbursement for wine/beer for fund raiser
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/21/2025	Payee name Kimich, Carolyn	
Amount (\$) \$225.00	Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b>  Anderson, TX 77830	
<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 Reimbursement for meeting lunch
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/15/2025	Payee name Mercury One-Kerr County Flood	
Amount (\$) \$500.00	Payee address; City; State; Zip Code POBox 121925  Dallas, TX 75312	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to flood victims
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: 12/13	2 FILER NAME Grimes County Republican Women	3 Filer ID (Ethics Commission Filers) 00067538
4 Date 09/08/2025	5 Payee name Navasota Examiner	
6 Amount (\$) \$383.50	7 Payee address; City; 1150 Railroad  Navasota, TX 77868	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	<p><b>8 PURPOSE OF EXPENDITURE</b></p> <p>(a) Category (See Categories listed at the top of this schedule) Advertising Expense</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Fund Raiser</p>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/29/2025	Payee name TFRW	Office held
Amount (\$) \$1,163.80	Payee address; City; 13740 N. Hwy 183  Austin, TX 78750	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	<p><b>PURPOSE OF EXPENDITURE</b></p> <p>(a) Category (See Categories listed at the top of this schedule) Fees</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Member expense</p>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 07/15/2025	Payee name Texas Youth Summit	Office held
Amount (\$) \$500.00	Payee address; City; P.O. Box 8105  Spring, TX 77387	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	<p><b>PURPOSE OF EXPENDITURE</b></p> <p>(a) Category (See Categories listed at the top of this schedule) Event Expense</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to the event</p>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 13/13	2 FILER NAME Grimes County Republican Women	3 Filer ID (Ethics Commission Filers) 00067538
4 Date 10/04/2025	5 Payee name Tovar, Teresa	
6 Amount (\$) \$403.53	7 Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b>  Plantersville, TX 77363	
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 Reimburse for bar expenses for fund raiser
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/16/2025	Payee name Turning Point USA	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 4940 East Beverly Road  Phoenix, AZ 85044	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation to Turning Point USA	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation after Charlie Kirk murder
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/04/2025	Payee name Walkers Cafe	
Amount (\$) \$4,205.63	Payee address; City; State; Zip Code 112 W Main Street  Madison, TX 77864	
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 Cateror for fund raiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held