

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers) 00065057		2 Total pages filed: 6		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/29/2026 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged							
3 COMMITTEE NAME	Tarrant Star Republican Women PAC										
4 TREASURER NAME	Morrison, Cynthia L. (Ms.)										
5 ORIGINAL REPORT TYPE	<table><tr><td>☐ January 15</td><td>☐ Runoff</td></tr><tr><td>☐ July 15</td><td>☐ 10th day after campaign treasurer resignation</td></tr><tr><td>☒ 30th day before election</td><td>☐ Dissolution report</td></tr><tr><td>☐ 8th day before election</td><td>☐ Other (specify) _____</td></tr></table>					☐ January 15	☐ Runoff	☐ July 15	☐ 10th day after campaign treasurer resignation	☒ 30th day before election	☐ Dissolution report
☐ January 15	☐ Runoff										
☐ July 15	☐ 10th day after campaign treasurer resignation										
☒ 30th day before election	☐ Dissolution report										
☐ 8th day before election	☐ Other (specify) _____										
6 ORIGINAL PERIOD COVERED	Month Day Year 01/22/2026		THROUGH Month Day Year 01/22/2026								

7 EXPLANATION OF CORRECTION

Corrected the period covered to reflect January 22, 2026 as the first day and last day covered in the reporting period. Looked at the calendar wrong after filing the Special Election Report which ended January 21, 2026.

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

☐ **Semiannual reports:** I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☒ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Ms. Cynthia L. Morrison

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

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) 00065057	2 Total pages filed: 6	
3 COMMITTEE NAME Tarrant Star Republican Women PAC			OFFICE USE ONLY	
			Date Received ELECTRONICALLY FILED 01/29/2026	
			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
			Date Imaged	
4 COMMITTEE ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2242 E. Loop 820 Fort Worth, TX 76112			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Cynthia L.			
	NICKNAME LAST SUFFIX Morrison			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2242 E. Loop 820 Fort Worth, TX 76112			
7 CAMPAIGN TREASURER MAILING ADDRESS ☐ Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2242 E. Loop 820 Fort Worth, TX 76112			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (817) 845-8211			
9 REPORT TYPE	☐ January 15 ☒ 30th day before election ☐ Dissolution (Attach PAC-DR)			
	☐ July 15 ☐ 8th day before election ☐ 10th day after campaign treasurer termination			
10 PERIOD COVERED	Month Day Year			
	01/22/2026 THROUGH 01/22/2026			
11 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE	
	☒ Primary ☐ Runoff ☐ Other ☐ General ☐ Special			

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Tarrant Star Republican Women PAC		13 Filer ID (Ethics Commission Filers) 00065057
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 Republican
		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) ☒ check here if this report qualifies for the higher itemization threshold
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 100.00
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	\$ 10,093.46
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. Cynthia L. Morrison

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
4 of 6

17 COMMITTEE NAME Tarrant Star Republican Women PAC		18 Filer ID (Ethics Commission Filers) 00065057
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 100.00
2.	☒ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	☒ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	☐ SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	☐ SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	☐ SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	☐ SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	☐ SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	☒ SCHEDULE E: LOANS	\$ 0.00
10.	☒ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 0.00
11.	☒ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	☒ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	☒ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 5/6

2 FILER NAME

Tarrant Star Republican Women PAC

3 Filer ID (Ethics Commission Filers)
00065057

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

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

7 Pledgor Address; City; State; Zip Code

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

☐ 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: 6/6
2 FILER NAME Tarrant Star Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00065057
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)