GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	2 Total pages filed: 64				
3 COMMITTEE NAME			•	OFFICE USE ONLY		
	Cy-Fair Republicar	ו Women PAC		Date Received ELECTRONICALLY FILED 07/06/2023		
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; CIT	Y; STATE; ZIP CODE			
	ADDRESS	10750 Barker Cypress Rd		Date Hand-delivered or Date Postmarked		
	Change of Address	Suite 104, PMB 153				
		Cypress, TX 77433		Receipt # Amount		
				Date Processed		
				Dale Processed		
				Date Imaged		
5	CAMPAIGN	MS / MRS / MR FIRST		MI		
	TREASURER NAME	Mrs. Micheline F.				
		NICKNAME LAST Hutson		SUFFIX		
6	CAMPAIGN TREASURER STREET ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); 11007 Wortham Blvd.	APT / SUITE #; CITY;	STATE; ZIP CODE		
	(Residence or Business)	Houston, TX 77065				
7	CAMPAIGN	STREET OR PO BOX;	APT / SUITE #; CITY	; STATE; ZIP CODE		
	TREASURER MAILING ADDRESS	11007 Wortham Blvd.				
	Change of Address	Houston, TX 77065				
8	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER I (713) 825-7720	EXTENSION			
9	REPORT	January 15 30				
	TYPE		Oth day before election	Dissolution (Attach PAC-DR)		
		X July 15	h day before election	10th day after campaign treasurer termination		
10	PERIOD COVERED	Month Day Year 01/01/2023 Th	Month Day HROUGH 06/30/2023	Year 3		
11	ELECTION		ELECTION TYPE Primary Runoff General Special	Other		
	GO TO PAGE 2					
Fo	Forms provided by Texas Ethics Commissionwww.ethics.state.tx.usVersion V3.5.1.3ac88bc0					

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)			
Cy-Fair Republican Wo	men PAC		00058757				
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported					
(Attach lists on plain paper to complete this report if necessary.)		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	PLEDGES, LOANS, CONTRIBUTIONS M	 POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold 	\$	0.00			
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	9,878.00			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00			
	4. TOTAL POLITICA	L EXPENDITURES	\$	13,766.43			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	13,888.56			
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	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.							
		Mrs. Micheli	ne F. Hutsor	1			
	Signature of Campaign Treasurer						
AFFIX NOTARY STAMP / SEAL ABOVE							
Sworn to and subscribed before me, by the said day							
of, 20, to certify which, witness my hand and seal of office.							
Signature of officer ad	Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath						
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V3.5.1.3ac88bc0			

FORM GPAC COVER SHEET PG 3

3 of 64

17 COMMITTI	(Ethics Con	nmission Filers)					
-	Cy-Fair Republican Women PAC 00058757						
19 SCHEDUL NAME OF	SUBT	OTAL AMOUNT					
1. X	\$	9,878.00					
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00			
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00			
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$				
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$				
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$				
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$				
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$				
9. X	SCHEDULE E: LOANS		\$	0.00			
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	13,766.43			
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00			
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	0.00			
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00			
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$				
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$				

SUBTOTALS - GPAC

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 1/48 Rpt: 4/64					
2 FILER NAME		3 Filer ID (Ethics Commission Filers	s)				
	ublican Women PAC		00058757	,			
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)				
04/11/2023	App, Bonnie L.			5.00			
	6 Contributor address; City; State; Zip Code		•				
	Cypress, TX 77429						
-	pation / Job title (See Instructions)	9 Employer (See Instructions	s)				
Retired							
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)				
01/10/2023	BAUGHMAN, PATRICIA		\$2	25.00			
	Contributor address; City; State; Zip Code						
Di balaan	Cypress, TX 77433						
	ipation / Job title (See Instructions)	Employer (See Instructions	s)				
Retired		<u> </u>	•				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)				
04/11/2023	BAUGHMAN, PATRICIA		\$2	25.00			
	Contributor address; City; State; Zip Code						
	Cypress, TX 77433						
Drincinal occu		Employer (See Instructions	<u></u>				
Retired	ipation / Job title (See Instructions)	Employer (See Instructions	5)				
		<u> </u>	Amount of Contribution (\$)				
Date 01/10/2023	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	25.00			
01/10/2023	Baker, Renee		ψΖ.	5.00			
	Contributor address; City; State; Zip Code						
	Houston, TX 77095						
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	s)				
Real Estate		self					
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)				
02/14/2023	Baker, Renee			5.00			
-	Contributor address; City; State; Zip Code						
	Houston, TX 77095						
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)				
Real Estate	Broker	self					
		<u> </u>					

			1 Total pages Schedule A1:				
The Instr	uction Guide explains how to complete this f	orm.	Sch: 2/48 Rpt: 5/64				
2 FILER NAM	E		3 Filer ID (Ethics Commission Filers)				
Cy-Fair Re	publican Women PAC		00058757				
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)				
04/11/2023	Baker, Renee		\$25.00				
	6 Contributor address; City; State; Zip Code						
	Houston, TX 77095						
8 Principal oc	cupation / Job title (See Instructions)	9 Employer (See Instructions	5)				
Real Estate		self	,				
Date	Full name of contributor Out-of-state PAC (ID#:_)	Amount of Contribution (\$)				
06/13/2023			\$25.00				
	Houston, TX 77095						
-	cupation / Job title (See Instructions)	Employer (See Instructions	3)				
Real Estate		self	1				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)				
01/10/2023			\$25.00				
	Contributor address; City; State; Zip Code						
	The Woodlands, TX 77389						
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	5)				
Retired							
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)				
03/16/2023	Barclay, Lois		\$25.00				
	Contributor address; City; State; Zip Code						
	The Woodlands, TX 77389						
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	<u> </u>				
Retired			·)				
Date	Full name of contributor Out-of-state PAC (ID#:_	<u>ا</u>	Amount of Contribution (\$)				
02/14/2023		/	\$25.00				
	Contributor address; City; State; Zip Code						
	The Woodlands, TX 77389						
-	cupation / Job title (See Instructions)	Employer (See Instructions	5)				
Retired	Retired						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 3/48 Rpt: 6/64		
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Cy-Fair Rep	ublican Women PAC			00058757	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/13/2023	Barclay, Lois			• •	\$25.00
		6 Contributor address; City; State; Zip Code				
		The Woodlands, TX 77389				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Retired					
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/14/2023	Barclay, Lois				\$75.00
		Contributor address; City; State; Zip Code				
		The Woodlands, TX 77389				
Γ		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/14/2023	Barker, Howard				\$50.00
		Contributor address; City; State; Zip Code				
		Waller , TX 77484				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	_
	05/09/2023	Barker, Howard				\$10.00
		Contributor address; City; State; Zip Code				
		Waller , TX 77484				
\vdash	Dringinal occu	pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	Jalion / Job lille (See Instructions)	Employer (See instructions	9		
╞				_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢10.00
	05/01/2023 Barker, Howard					\$10.00
		Contributor address; City; State; Zip Code				
		Waller , TX 77484				
\vdash	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired			9		
\vdash		I				

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 4/48 Rpt: 7/64		
2	FILER NAME		3	Filer ID (Ethics Commission	n Filers)	
	Cy-Fair Rep	ublican Women PAC			00058757	
4	Date	5 Full name of contributor Out-of-state PAC (ID#	<i>±</i> :)	7	Amount of Contribution (\$)	
	05/09/2023	Barkley, Lois				\$25.00
		6 Contributor address; City; State; Zip Code		ł		
		Cypress, TX 77429				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	retired					
⊨	Date	Full name of contributor out-of-state PAC (ID#)	Γ	Amount of Contribution (\$)	
	03/21/2023	Baughman, Patricia				\$250.00
		Contributor address; City; State; Zip Code		1		
		Cypress, TX 77433				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	retired					
	Date	Full name of contributor out-of-state PAC (ID#)	Ī	Amount of Contribution (\$)	
	02/14/2023	Baughman, Patricia				\$25.00
		Contributor address; City; State; Zip Code		1		
	<u></u>	Cypress, TX 77433		Ĺ		
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
				_		
	Date	Full name of contributor Out-of-state PAC (ID#	t:)		Amount of Contribution (\$)	
	05/09/2023	Baughman, Patricia]		\$25.00
		Contributor address; City; State; Zip Code				
		Cypress, TX 77433				
┝	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	retired			>)		
⊨		Full name of contributor Out-of-state PAC (ID#		T	Amount of Contribution (\$)	
	Date 06/13/2023	Full name of contributor out-of-state PAC (ID# Baughman, Patricia	£:)			\$25.00
			•		Ψ20.00	
		Contributor address; City; State; Zip Code				
		Cypress, TX 77433				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	retired			,		
\vdash						

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 5/48 Rpt: 8/64	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Cy-Fair Rep	bublican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
01/10/2023	Bayers, Shirley		\$25.00
	6 Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
-	upation / Job title (See Instructions)	9 Employer (See Instructions	;)
retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/16/2023	Bayers, Shirley		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
Bringinal occu	upation / Job title (See Instructions)	Employer (See Instructions	
retired			»)
		<u> </u>	Amount of Contribution (\$)
Date 05/09/2023	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$) \$25.00
03/09/2023	Bayers, Shirley		φ23.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/13/2023	Blanchard, Megan		\$25.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77095		
-	upation / Job title (See Instructions)	Employer (See Instructions	;)
educator		CyFair ISD	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/30/2023	Burrer, Nita		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77429		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	
Retired		''	

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 6/48 Rpt: 9/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Cy-Fair Rep	ublican Women PAC		00058757
4 Date 03/07/2023	5 Full name of contributor out-of-state PAC (ID# Burrer, Nita	#:)	7 Amount of Contribution (\$)\$25.00
	6 Contributor address; City; State; Zip Code		
	Cypress, TX 77429		
-	upation / Job title (See Instructions)	9 Employer (See Instructions	5)
Retired			
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
04/11/2023	Burrer, Nita		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77429		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Retired			<i>)</i>
	Full name of contributor Out-of-state PAC (ID+		Amount of Contribution (ft)
Date 04/11/2023		#:)	Amount of Contribution (\$) \$40.00
04/11/2023			\$40.00
	Contributor address; City; State; Zip Code		
	cypress, TX 77433		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)
Business Ov	wner		
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
04/11/2023	Buxton, Barbara		\$5.00
	Contributor address; City; State; Zip Code		
	cypress, TX 77433		
-	upation / Job title (See Instructions)	Employer (See Instructions	3)
Business O	-		
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
03/02/2023	Carver, Cindy		\$25.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77095		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	
Retired			7

			-
The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 7/48 Rpt: 10/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Cy-Fair Rep	ublican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (ID	#:)	7 Amount of Contribution (\$)
02/21/2023	Carver, Cindy		\$250.00
	6 Contributor address; City; State; Zip Code		1
	Houston TV 7700E		
8 Principal occu	Houston, TX 77095 Ipation / Job title (See Instructions)	9 Employer (See Instructions	c)
Retired			»/
Date	Full name of contributor 🔲 out-of-state PAC (ID	#:)	Amount of Contribution (\$)
04/11/2023	Carver, Cindy		\$25.00
	Contributor address; City; State; Zip Code]
	Houston, TX 77095		
Princinal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Retired			"
Date	Full name of contributor Out-of-state PAC (ID		Amount of Contribution (\$)
04/25/2023	Carver, Cindy	m	\$25.00
	Contributor address; City; State; Zip Code		1
<u>_</u>	Houston, TX 77095		<u> </u>
Principal occu Retired	ipation / Job title (See Instructions)	Employer (See Instructions	3)
Date	Full name of contributor out-of-state PAC (ID)#:)	Amount of Contribution (\$)
06/13/2023	Carver, Cindy		\$25.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77095		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Retired			
Date	Full name of contributor out-of-state PAC (ID	#:)	Amount of Contribution (\$)
06/14/2023	Carver, Cindy		\$150.00
	Contributor address; City; State; Zip Code		1
	Houston, TX 77095		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	c)
Retired			»)

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 8/48 Rpt: 11/64	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	ublican Women PAC		00058757	/
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
02/06/2023	Chambers, Shirley		\$	\$50.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77084			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions		
retired				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
03/16/2023	Chambers, Shirley		\$	\$25.00
	Contributor address; City; State; Zip Code			
	· · · · · · · · · · · · · · · · · · ·			
	Houston, TX 77084			
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions)	
retired				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
04/11/2023	Chambers, Shirley)		\$25.00
04/11/2023	-		+	23.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77084			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
retired)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
05/09/2023	Chambers, Shirley		\$	\$25.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77084			
-	pation / Job title (See Instructions)	Employer (See Instructions		
retired				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
05/09/2023	Collins, Betty		\$	\$25.00
	Contributor address; City; State; Zip Code			
	cypress, TX 77429-5543			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
Retired				

The Instru	ction Guide explains how to complete this f	form	1 Total pages Schedule A1:
		Orm.	Sch: 9/48 Rpt: 12/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ublican Women PAC		00058757
4 Date 06/13/2023	5 Full name of contributor out-of-state PAC (ID#: Collins, Betty)	7 Amount of Contribution (\$) \$25.0
	6 Contributor address; City; State; Zip Code		1
	cypress, TX 77429-5543		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
Retired			·/
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/11/2023	Collins, Elizabeth (Mrs.)		\$35.0
	Contributor address; City; State; Zip Code		1
Dringing loog	Cypress, TX 77429		<u> </u>
Principal occu Homemaker	upation / Job title (See Instructions) r	Employer (See Instructions	3)
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
04/11/2023	Collins, Elizabeth (Mrs.)		\$25.0
	Contributor address; City; State; Zip Code		
	Cypress, TX 77429		
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ŝ)
Homemaker			,
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
04/11/2023	Cowell, Ronnye		\$5.0
	Contributor address; City; State; Zip Code		•
	Houston, TX 77024		
	upation / Job title (See Instructions)	Employer (See Instructions	3)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
03/16/2023	Crenshaw, C C		\$20.0
	Contributor address; City; State; Zip Code		1
Dringing ago	Spring, TX 77379		<u> </u>
Principal occu retired	upation / Job title (See Instructions)	Employer (See Instructions	\$)
retireu			

The Instru	iction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 10/48 Rpt: 13/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	bublican Women PAC		00058757
4 Date 03/16/2023	 5 Full name of contributor out-of-state PAC (ID#: Davis, Suzanne 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$25.00
	Houston, TX 77064		
 8 Principal occu Stager/Paint 	upation / Job title (See Instructions) ter	9 Employer (See Instructions) self)
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
02/16/2023	Davis, Suzanne	/	\$25.00
0211012020			Ψ20.00
	Houston, TX 77064		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))
Stager/Paint	ter	self	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/11/2023	Davis, Suzanne		\$25.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77064		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))
Stager/Paint	ter	self	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/09/2023	Davis, Suzanne		\$25.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77064		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))
Stager/Paint		self	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
06/13/2023	Davis, Suzanne		\$25.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77064		
	upation / Job title (See Instructions)	Employer (See Instructions))
Stager/Paint	ter	self	

The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 11/48 Rpt: 14/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Cy-Fair Rep	ublican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
03/06/2023	Draughton, Susan		\$25.00
	6 Contributor address; City; State; Zip Code		
C. D. Lastan	Houston, TX 77095		<u> </u>
8 Principal occu Interior Desi		9 Employer (See Instructions	·)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/16/2023			\$55.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77095		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Interior Desi		Employer (occ moradation)	'
Date			Amount of Contribution (\$)
06/13/2023	Full name of contributor out-of-state PAC (ID#: Draughton, Susan)	\$25.00
00/10/2020	Contributor address; City; State; Zip Code		
	Houston, TX 77095		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
Interior Desi	gner		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/10/2023	Edwards, DeBra		\$5.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
-	upation / Job title (See Instructions)	Employer (See Instructions	;)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/14/2023	Edwards, DeBra		\$5.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Retired			<i>'</i>

Th	ie Instru	ction Guide explains how to co	omplete this fo	orm.	1	Total pages Schedule A1: Sch: 12/48 Rpt: 15/64	
2 FIL	ER NAME				3	Filer ID (Ethics Commission	I Filers)
		ublican Women PAC				00058757	
4 Dat	te	5 Full name of contributor	it-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
02/	/14/2023	Edwards, DeBra					\$5.00
		6 Contributor address; City; State; Zi	p Code		1		
		0 TV 77400					
		Cypress, TX 77433		2 Employer (Cap Instructions			
	ncipal occu etired	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
				、 、	-		
Dat			it-of-state PAC (ID#:)		Amount of Contribution (\$)	Ф <u>Э</u> Б 00
04/	/11/2023						\$25.00
	Contributor address; City; State; Zip Code						
		Cypress, TX 77433					
Prir	ncipal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	etired			• •			
Dat	te	Full name of contributor	it-of-state PAC (ID#:)		Amount of Contribution (\$)	
	/09/2023	Edwards, DeBra				···· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·	\$10.00
	Contributor address; City; State; Zip Code						
			L .				
		Cypress, TX 77433					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
Re	etired						
Dat		Full name of contributor 🛛 🗌 ou	it-of-state PAC (ID#:)		Amount of Contribution (\$)	
06/	/13/2023	Fierro, Angel					\$25.00
		Contributor address; City; State; Zij					
		Houston, TX 77043					
Prir	ncinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> יו		
	•	or Rep Lacey Hull		state of Texas	<i>י</i> י		
			· () (Interior of the second seco	<u> </u>	Amount of Contribution (\$)	
Dat	le /30/2023	Foster, Bonnie (Ms.)	it-of-state PAC (ID#:)		ΑΠουπι οι σοππισαιότη (φ)	\$25.00
01,	3012020	Contributor address; City; State; Zi	n Code				Ψ20.00
		Cultuributor audress, City, State, Zij	p Coue				
		Cypress, TX 77433					
Prir	ncipal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
He	alth Coac	h		self-employed			

_						
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 13/48 Rpt: 16/64	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		ublican Women PAC			00058757	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7	Amount of Contribution (\$)	
	03/01/2023	Foster, Bonnie (Ms.)				\$25.00
	I	6 Contributor address; City; State; Zip Code		1		
Ļ	- · · ·	Cypress, TX 77433		Ļ		
8	Principal occu Health Coac	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
			self-employed			
	Date	—	:)		Amount of Contribution (\$)	±==== ==
	03/01/2023					\$500.00
	Contributor address; City; State; Zip Code					
		cypress, TX 77429				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Health Coac		self-employed	5)		
				T	Amount of Contribution (ft)	
	Date 04/11/2023	—	:)		Amount of Contribution (\$)	\$50.00
	04/11/2023	Foster, Bonnie (Ms.)		•		φου.υσ
		Contributor address; City; State; Zip Code				
		cypress, TX 77433				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Health Coac	h	self-employed			
	Date	Full name of contributor out-of-state PAC (ID#:	· :)		Amount of Contribution (\$)	
	04/24/2023	Foster, Bonnie (Ms.)				\$50.00
		Contributor address; City; State; Zip Code		1		
		cypress, TX 77433	_			
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Health Coac	h	self-employed			
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Γ	Amount of Contribution (\$)	
	06/13/2023	Foster, Bonnie (Ms.)				\$50.00
		Contributor address; City; State; Zip Code]		
		STREAM TV 77422				
	Dringing ogg	cypress, TX 77433		- \		
		Ipation / Job title (See Instructions)	Employer (See Instructions Club Sports, Inc.	5)		
	sales manag	,er	Ciub Sports, inc.			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 14/48 Rpt: 17/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Cy-Fair Rep	ublican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
01/10/2023	Gibson, Edith		\$25.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77064		
	pation / Job title (See Instructions)	9 Employer (See Instructions	3)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/03/2023	Gibson, Edith		\$25.00
	Contributor address; City; State; Zip Code		
	Houston TV 77064		
Drincinal occu	Houston, TX 77064	Employer (See Instructions	
Retired	pation / Job title (See Instructions)	Employer (See instructions	;)
		<u> </u>	
Date 02/14/2023	Full name of contributor out-of-state PAC (ID#: Gibson, Edith)	Amount of Contribution (\$) \$5.00
UZ/14/2023			ψυ.υυ
	Contributor address; City; State; Zip Code		
	Houston, TX 77064		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	\$)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/09/2023	Gibson, Edith		\$5.00
	Contributor address; City; State; Zip Code		1
	Houston, TX 77064	1	<u> </u>
	pation / Job title (See Instructions)	Employer (See Instructions	;)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
06/13/2023	Gibson, Edith		\$10.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77064		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
Retired			''
		<u> </u>	

			1 Total pages Schedule A1:
The Instru	uction Guide explains how to complete th	is form.	Sch: 15/48 Rpt: 18/64
2 FILER NAME	Ē		3 Filer ID (Ethics Commission Filers)
Cy-Fair Re	publican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of Contribution (\$)
01/10/2023			\$25.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77095		
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
Retired			-
Date	Full name of contributor out-of-state PAC (I	 /ID#:)	Amount of Contribution (\$)
01/10/2023			\$5.00
			•
	Cypress, TX 77433		
-	upation / Job title (See Instructions)	Employer (See Instructions	s)
Retired			T
Date	Full name of contributor Out-of-state PAC (I	ID#:)	Amount of Contribution (\$)
03/03/2023			\$5.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	s)
Retired			
Date	Full name of contributor out-of-state PAC (I	 ID#:)	Amount of Contribution (\$)
04/11/2023	Gosnell, Patricia		\$5.00
	Contributor address; City; State; Zip Code		1
	Cypress, TX 77433		
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions	c)
Retired			5)
Date	Full name of contributor out-of-state PAC (I)	Amount of Contribution (\$)
01/02/2023		10π/	\$25.00
	Contributor address; City; State; Zip Code		•
	Cypress, TX 77433		
-	upation / Job title (See Instructions)	Employer (See Instructions	s)
retired			
1			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 16/48 Rpt: 19/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ublican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
03/16/2023	Gregory, Joy		\$25.00
	6 Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
	upation / Job title (See Instructions)	9 Employer (See Instructions))
retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/14/2023	Gregory, Joy		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
	upation / Job title (See Instructions)	Employer (See Instructions)
retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/09/2023	Gregory, Joy		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
	upation / Job title (See Instructions)	Employer (See Instructions)
retired			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
06/13/2023	Gregory, Joy		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433	1	
	upation / Job title (See Instructions)	Employer (See Instructions))
retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/10/2023	Gullett, Alice		\$25.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77041		
	upation / Job title (See Instructions)	Employer (See Instructions)
Retired			

	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 17/48 Rpt: 20/64	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Cy-Fair Rep	ublican Women PAC				00058757	-
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	03/16/2023	Gullett, Alice					\$25.00
		6 Contributor address; City; State;	; Zip Code				
_	Detectional ensure	Houston, TX 77041			Ĺ		
	Principal occu Retired	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/14/2023	Gullett, Alice					\$25.00
		Contributor address; City; State;					
	Detectional ensure	Houston, TX 77041			Ĺ		
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
					-		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 25 00
	04/11/2023	Gullett, Alice					\$25.00
		Contributor address; City; State;	; Zip Code				
		Houston, TX 77041					
	Principal occu	n pation / Job title (See Instructions)		Employer (See Instructions	 ;)		
	Retired						
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/09/2023	Gullett, Alice					\$25.00
		Contributor address; City; State;	; Zip Code				
		Houston, TX 77041			Ĺ		
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
					-		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	ቀጋር በበ
	03/16/2023	HUTSON, MICHELINE					\$25.00
		Contributor address; City; State;	; Zip Code				
		HOUSTON, TX 77065					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	retired	,			,		
┢─			I				

	The Instru	ction Guide explains how to com	plete this fo	orm.	1	Total pages Schedule A1: Sch: 18/48 Rpt: 21/64	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		ublican Women PAC				00058757	/
4	Date	5 Full name of contributor out-of-s	state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/14/2023	HUTSON, MICHELINE					\$10.00
		6 Contributor address; City; State; Zip Co					
		HOUSTON, TX 77065	r				
8		pation / Job title (See Instructions)		9 Employer (See Instructions)		
	retired						
	Date	Full name of contributor	state PAC (ID#:)		Amount of Contribution (\$)	
	04/11/2023	HUTSON, MICHELINE					\$25.00
		Contributor address; City; State; Zip Co	ode				
		HOUSTON, TX 77065					
	•	pation / Job title (See Instructions)		Employer (See Instructions)		
	retired						
	Date	Full name of contributor out-of-s	state PAC (ID#:)		Amount of Contribution (\$)	
	05/09/2023	HUTSON, MICHELINE					\$25.00
		Contributor address; City; State; Zip Co					
		HOUSTON, TX 77065					
		pation / Job title (See Instructions)		Employer (See Instructions)		
	retired						
	Date	Full name of contributor out-of-s	state PAC (ID#:)		Amount of Contribution (\$)	
	05/09/2023	HUTSON, MICHELINE					\$25.00
		Contributor address; City; State; Zip Co					
		HOUSTON, TX 77065					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	retired						
	Date	Full name of contributor out-of-s	state PAC (ID#:)		Amount of Contribution (\$)	
	06/13/2023	HUTSON, MICHELINE					\$25.00
		Contributor address; City; State; Zip Co	ode				
		HOUSTON, TX 77065					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	retired						
			I				

	The Instru	ction Guide explains how to complete this	s form.		Total pages Schedule A1: Sch: 19/48 Rpt: 22/64	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		ublican Women PAC			00058757	,
4	Date	5 Full name of contributor out-of-state PAC (ID	D#:)	7	Amount of Contribution (\$)	
	03/14/2023	Handley, Grace				\$65.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77070				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	District Direc	:tor	State of Texas			
	Date	Full name of contributor 🔲 out-of-state PAC (ID	D#:)		Amount of Contribution (\$)	
	06/13/2023	Handley, Grace				\$10.00
		Contributor address; City; State; Zip Code		"		
		Houston, TX 77070				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	District Direc	.tor	State of Texas			
	Date	Full name of contributor 🔲 out-of-state PAC (IE	D#:)		Amount of Contribution (\$)	
	01/10/2023	Harrington, Mary Ellen				\$25.00
		Contributor address; City; State; Zip Code		1		
		Spring, TX 77379				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired					
	Date	Full name of contributor out-of-state PAC (IE	D#:)		Amount of Contribution (\$)	
	03/14/2023	Harrington, Mary Ellen				\$10.00
		Contributor address; City; State; Zip Code		"		
		Spring, TX 77379				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired					
	Date	Full name of contributor 🔲 out-of-state PAC (IE	D#:)		Amount of Contribution (\$)	
	06/13/2023	Harrington, Mary Ellen				\$10.00
		Contributor address; City; State; Zip Code				
		Spring, TX 77379				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired					

The Instru	uction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 20/48 Rpt: 23/64
2 FILER NAME	 _		3 Filer ID (Ethics Commission Filers)
Cy-Fair Rep	publican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7 Amount of Contribution (\$)
01/10/2023			\$25.
	6 Contributor address; City; State; Zip Code		1
2 Dringinglage	Houston, TX 77095		
8 Principal occ retired	upation / Job title (See Instructions)	9 Employer (See Instructions	5)
			1
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
03/16/2023			\$25.
	Contributor address; City; State; Zip Code		
	Houston, TX 77095		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	s)
retired			,
Date	Full name of contributor out-of-state PAC (ID#		Amount of Contribution (\$)
02/16/2023		··	\$25.
			1
	Houston, TX 77095		
-	upation / Job title (See Instructions)	Employer (See Instructions	S)
retired			
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
04/11/2023			\$25.
	Contributor address; City; State; Zip Code		
	Houston, TX 77095		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
retired	,		-,
Date	Full name of contributor Out-of-state PAC (ID#		Amount of Contribution (\$)
06/13/2023		··	\$10.
	Contributor address; City; State; Zip Code		1
	Houston, TX 77095		
-	upation / Job title (See Instructions)	Employer (See Instructions	s)
retired			

The Instru	uction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 21/48 Rpt: 24/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Cy-Fair Re	publican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
01/31/2023	Hull, Lacey		\$25.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77224	1	
-	cupation / Job title (See Instructions)	9 Employer (See Instructions)
	epresentative		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/13/2023			\$25.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77224		
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
•	epresentative)
Date	Full name of contributor Out-of-state PAC (ID#:_		Amount of Contribution (\$)
02/06/2023			\$25.00
02,00,2022	Contributor address; City; State; Zip Code		
	HOUSTON, TX 77065		
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions	;)
reired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/30/2023	Hutson, MICHELINE		\$25.00
	Contributor address; City; State; Zip Code		
	LOUGTON TY 77065		
Dringinal occ	HOUSTON, TX 77065 cupation / Job title (See Instructions)	Employer (See Instructions	
retired		Employer (See Instructions	·)
		<u> </u>	Amount of Contribution (\$)
Date 01/10/2023	Full name of contributor out-of-state PAC (ID#:_ Hutson, Micheline)	Amount of Contribution (\$) \$25.00
	· · · · · · · · · · · · · · · · · · ·		Ψ20.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77065		
Principal occ	supation / Job title (See Instructions)	Employer (See Instructions	L;)
Retired			

			1
The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 22/48 Rpt: 25/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Cy-Fair Rep	ublican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
02/14/2023			\$25.00
	6 Contributor address; City; State; Zip Code		1
	Houston, TX 77065	1	
	upation / Job title (See Instructions)	9 Employer (See Instructions	3)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/11/2023	Hutson, Micheline		\$5.00
	Contributor address; City; State; Zip Code		1
	HOUSTON, TX 77065	-	
	upation / Job title (See Instructions)	Employer (See Instructions	5)
retired		<u> </u>	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
04/11/2023	Hutson, Micheline		\$5.00
	Contributor address; City; State; Zip Code		1
	HOUSTON, TX 77065		<u> </u>
-	upation / Job title (See Instructions)	Employer (See Instructions	š)
retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/08/2023	Hutson, Micheline (Mrs.)		\$25.00
	Contributor address; City; State; Zip Code]
D in single and	Houston, TX 77065		<u> </u>
	upation / Job title (See Instructions)	Employer (See Instructions	3)
retired		<u> </u>	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/09/2023	Kopinitz, Cinthia		\$5.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77040		<u> </u>
-	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Retired			

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 23/48 Rpt: 26/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Cy-Fair Rep	ublican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7 Amount of Contribution (\$)
04/11/2023	Kopinitz, Cinthia		\$25.00
	6 Contributor address; City; State; Zip Code		1
	Houston, TX 77040		
	upation / Job title (See Instructions)	9 Employer (See Instructions	3)
Retired			
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
05/09/2023	Kopinitz, Cinthia		\$10.00
	Contributor address; City; State; Zip Code		1
Di indaan	Houston, TX 77040		<u> </u>
	upation / Job title (See Instructions)	Employer (See Instructions	3)
Retired			·
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
01/10/2023	Llewellyn, Linda		\$25.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77095		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
retired			>)
			Amount of Contribution (\$)
Date 03/16/2023	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$) \$25.00
03/10/2023	-		φ23.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77095		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> \$)
retired			,
Date	Full name of contributor Out-of-state PAC (ID#		Amount of Contribution (\$)
02/14/2023	Llewellyn, Linda	τ,	\$80.00
	Contributor address; City; State; Zip Code		•
	Houston, TX 77095		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
retired			
		. 1	

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 24/48 Rpt: 27/64	
2 FILER NAME			3 Filer ID (Ethics Commission I	Filers)
	ublican Women PAC		00058757	,
4 Date	5 Full name of contributor out-of-state PAC (ID:	#:)	7 Amount of Contribution (\$)	
02/14/2023	Llewellyn, Linda			\$25.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77095			
	ipation / Job title (See Instructions)	9 Employer (See Instructions	3)	
retired				
Date	Full name of contributor out-of-state PAC (ID:	#:)	Amount of Contribution (\$)	
04/11/2023	Llewellyn, Linda			\$25.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77095			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	
retired				
Date	Full name of contributor out-of-state PAC (ID:	#:)	Amount of Contribution (\$)	
05/09/2023	Llewellyn, Linda			\$25.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77095			
	ipation / Job title (See Instructions)	Employer (See Instructions	3)	
retired				
Date	Full name of contributor out-of-state PAC (ID	#:)	Amount of Contribution (\$)	
06/13/2023	Llewellyn, Linda			\$25.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77095			
-	pation / Job title (See Instructions)	Employer (See Instructions	3)	
retired				
Date	Full name of contributor out-of-state PAC (ID	#:)	Amount of Contribution (\$)	
01/10/2023	McCulloch, Barbara			\$25.00
	Contributor address; City; State; Zip Code			
	Cypress, TX 77433	-		
-	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Retired				

					-		
	The Instru	ction Guide explains how to co	mplete this fo	orm.	1	Total pages Schedule A1: Sch: 25/48 Rpt: 28/64	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		ublican Women PAC				00058757	
	Date 06/13/2023	5 Full name of contributor out- Metzler, Melony	of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$50.00
	00/10/2020	-	Codo				Ψ00.00
		6 Contributor address; City; State; Zip	Code				
		1					
		Houston, TX 77084					
8		pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	business ow	ner					
	Date	Full name of contributor out-	of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/05/2023	Mohler, Diane					\$25.00
		Contributor address; City; State; Zip			1		
		1					
		1					
		Houston, TX 77084					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	retired						
	Date	Full name of contributor	of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/05/2023	Mohler, Diane					\$25.00
		Contributor address; City; State; Zip	Code		1		
		1					
		1					
		Houston, TX 77084					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	retired						
	Date	Full name of contributor	of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/22/2023	Mohler, Diane					\$250.00
		Contributor address; City; State; Zip	Code		1		
		Houston, TX 77084					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	retired						
	Date	Full name of contributor	of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	04/11/2023	Mohler, Diane					\$25.00
		Contributor address; City; State; Zip	Code		1		
		1					
		1					
		Houston, TX 77084					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	retired						

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 26/48 Rpt: 29/64	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	ublican Women PAC		00058757	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
04/28/2023	Mohler, Diane			\$25.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77084			
	pation / Job title (See Instructions)	9 Employer (See Instructions)	
retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/13/2023	Mohler, Diane			\$25.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77084			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	
retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/14/2023	Mohler, Diane			\$138.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77084			
	pation / Job title (See Instructions)	Employer (See Instructions)	
retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/14/2023	Morris, Donna			\$5.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77070			
	pation / Job title (See Instructions)	Employer (See Instructions)	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
04/11/2023	Morris, Donna			\$25.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77070			
	pation / Job title (See Instructions)	Employer (See Instructions)	
Retired Profe	essor			

The Ins	truction Guide explains how to complete this for	rm.	1 Total pages Schedule A1: Sch: 27/48 Rpt: 30/64	
2 FILER N	ME		3 Filer ID (Ethics Commission File	ers)
Cy-Fair	Republican Women PAC		00058757	-
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
05/02/20			\$	\$25.00
	6 Contributor address; City; State; Zip Code			
	houston, TX 77070			
8 Principal retired	peccupation / Job title (See Instructions) 9	Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/14/20				\$5.00
	Contributor address; City; State; Zip Code			
Dringing	Houston, TX 77095	Eventeuer (Coo Instructione)	<u>_</u>	
Principal Retired	occupation / Job title (See Instructions)	Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	*0F 00
04/11/20			4	\$25.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77095			
Principal	occupation / Job title (See Instructions)	Employer (See Instructions))	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
05/10/20	23 Nobis, Thomas		\$	\$25.00
	Contributor address; City; State; Zip Code			
	Hauston TV 7700F			
Drincipal	Houston, TX 77095	Employer (Soo Instructions)	A	
Retired	occupation / Job title (See Instructions)	Employer (See Instructions))	
			Amount of Contribution (\$)	
Date 06/13/20	Full name of contributor out-of-state PAC (ID#: 23 Nobis, Thomas)	Amount of Contribution (\$)	\$25.00
00/10/20	Contributor address; City; State; Zip Code		4	ΦΖΟ.00
	Houston, TX 77095			
Principal	occupation / Job title (See Instructions)	Employer (See Instructions))	
Retired				

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 28/48 Rpt: 31/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ublican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (ID#		7 Amount of Contribution (\$)
02/06/2023	Ott, Jan		\$25.00
	6 Contributor address; City; State; Zip Code		1
	Houston, TX 77095		
-	upation / Job title (See Instructions)	9 Employer (See Instructions	5)
Consultant	<u> </u>	self	
Date		t:)	Amount of Contribution (\$)
03/14/2023	Ott, Jan		\$5.00
	Contributor address; City; State; Zip Code		
	Lauston TV 77005		
Dringing and	Houston, TX 77095	Employer (Coo Instructions	-
Principal occu Consultant	upation / Job title (See Instructions)	Employer (See Instructions self	5)
			T
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
03/14/2023			\$55.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77095		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Consultant		self	5)
Date	Full name of contributor Out-of-state PAC (ID#		Amount of Contribution (\$)
04/11/2023	Full name of contributor out-of-state PAC (ID#)	:)	Amount of Contribution (\$) \$25.00
04/11/2025			φ20.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77095		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
Consultant		self	
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
06/13/2023	Ott, Jan		\$25.00
	Contributor address; City; State; Zip Code		•
	Houston, TX 77095		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
Consultant		self	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 29/48 Rpt: 32/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Cy-Fair Rep	ublican Women PAC		00058757
4 Date 03/16/2023	5 Full name of contributor out-of-state PAC (ID#: Parrish Rita)	7 Amount of Contribution (\$) \$25.00
03/10/2023	Parrish, Rita		φ20.00
	6 Contributor address; City; State; Zip Code		
	Cypress, TX 77429		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/14/2023	Parrish, Rita		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77429		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	
Retired			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
02/14/2023	Parrish, Rita		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77429		
-	pation / Job title (See Instructions)	Employer (See Instructions	
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/02/2023	Parrish, Rita		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77429		
-	pation / Job title (See Instructions)	Employer (See Instructions	
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/13/2023	Parrish, Rita		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77429		
-	pation / Job title (See Instructions)	Employer (See Instructions	s)
Retired			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 30/48 Rpt: 33/64	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	ublican Women PAC		00058757	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
03/14/2023	Peak, Julie			\$5.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77095			
	upation / Job title (See Instructions)	9 Employer (See Instructions)	
Attorney				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/10/2023	Peters, Stephanie (Mrs.)			\$50.00
	Contributor address; City; State; Zip Code			
	Magnalia TX 77205			
Dringing! ago	Magnolia, TX 77395	Employer (Cap Instructions)	
broker	upation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	۴ Γ 00
03/14/2023	Peters, Stephanie (Mrs.)			\$5.00
	Contributor address; City; State; Zip Code			
	Magnolia, TX 77395			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	
broker		, . ,	,	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
04/11/2023	Peters, Stephanie (Mrs.)	/		\$25.00
	Contributor address; City; State; Zip Code			
	Magnolia, TX 77395			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	
broker				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
05/09/2023	Peters, Stephanie (Mrs.)			\$25.00
	Contributor address; City; State; Zip Code			
	Magnolia, TX 77395			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	
broker				

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 31/48 Rpt: 34/64	
2 FILER NAME			3 Filer ID (Ethics Commission F	Filers)
	ublican Women PAC		00058757	
4 Date	5 Full name of contributor out-of-state PAC (ID#	t:)	7 Amount of Contribution (\$)	
06/13/2023	Peters, Stephanie (Mrs.)			\$25.00
	6 Contributor address; City; State; Zip Code			
	Magnolia, TX 77395			
-	upation / Job title (See Instructions)	9 Employer (See Instructions	3)	
broker				
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
03/14/2023	Peterson, Kelly			\$20.00
	Contributor address; City; State; Zip Code			
	Spring, TX 77379			
-	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
District Direc	ctor for Sam Harless			
Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)	
02/14/2023	Peterson, Kelly			\$5.00
	Contributor address; City; State; Zip Code			
	Spring, TX 77379			
	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
District Direc	ctor for Sam Harless			
Date	Full name of contributor out-of-state PAC (ID#	¢:)	Amount of Contribution (\$)	
01/10/2023	Poli, Bonnie			\$10.00
	Contributor address; City; State; Zip Code			
	Cypress, TX 77433			
	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
Retired				
Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)	_
02/14/2023	Poli, Bonnie			\$10.00
	Contributor address; City; State; Zip Code			
	Cypress, TX 77433			
	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Retired				

	The Instru	ction Guide explains how to complet	te this fo	orm.	1	Total pages Schedule A1: Sch: 32/48 Rpt: 35/64	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
-		ublican Women PAC				00058757	11 110.07
4	Date	5 Full name of contributor out-of-state F	PAC (ID#:)	7	Amount of Contribution (\$)	
	04/11/2023	Poli, Bonnie					\$5.00
		6 Contributor address; City; State; Zip Code					
		1					
		1					
		Cypress, TX 77433					
8		pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Retired						
	Date	Full name of contributor 🗌 out-of-state F	PAC (ID#:)		Amount of Contribution (\$)	
	03/14/2023	Poli, Larry					\$5.00
		Contributor address; City; State; Zip Code					
		1					
		1					
		Cypress, TX 77433					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired						
F	Date	Full name of contributor out-of-state F	PAC (ID#:)		Amount of Contribution (\$)	
	05/01/2023	Poli, Larry					\$25.00
		Contributor address; City; State; Zip Code					
		1					
		1					
		Cypress, TX 77433					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						
	Date	Full name of contributor 🛛 out-of-state F	PAC (ID#:)		Amount of Contribution (\$)	
	06/13/2023	Poli, Larry					\$20.00
		Contributor address; City; State; Zip Code					
		1					
		1					
		Cypress, TX 77433					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						
	Date	Full name of contributor out-of-state F	PAC (ID#:)		Amount of Contribution (\$)	
	01/10/2023	Powell, Patricia					\$25.00
		Contributor address; City; State; Zip Code					
		1					
		1					
		Cypress, TX 77433					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Entertainer/s	inger		self			

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 33/48 Rpt: 36/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	bublican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
03/14/2023			\$5.
	6 Contributor address; City; State; Zip Code		1
	Cypress, TX 77433	i	
	upation / Job title (See Instructions)	9 Employer (See Instructions	\$)
Entertainer/	singer	self	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
04/11/2023			\$5.
	Contributor address; City; State; Zip Code		1
	Cypress, TX 77433		
	upation / Job title (See Instructions)	Employer (See Instructions	3)
Entertainer/	singer	self	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/10/2023	Powell, Patricia		\$10.
	Contributor address; City; State; Zip Code		1
	Cypress, TX 77433	-i	
-	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Entertainer/	singer	self	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/13/2023	Powell, Patricia		\$10.
	Contributor address; City; State; Zip Code		1
	Cypress, TX 77433		
	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Entertainer/	singer	self	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/14/2023	Roberts, Nancy		\$20.
	Contributor address; City; State; Zip Code]
	Jersey Village, TX 77040	i	
	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Retired			
1			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 34/48 Rpt: 37/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Cy-Fair Rep	ublican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
02/14/2023	Roberts, Nancy		\$20.00
	6 Contributor address; City; State; Zip Code		
	Jersey Village, TX 77040		
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	8)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/14/2023	Roberts, Nancy		\$25.00
	Contributor address; City; State; Zip Code		
	Jersey Village, TX 77040		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/13/2023	Roberts, Nancy		\$25.00
	Contributor address; City; State; Zip Code		
	Jersey Village, TX 77040		
	pation / Job title (See Instructions)	Employer (See Instructions	3)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/07/2023	Rutherford, Beth		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77429		
	<pre>ipation / Job title (See Instructions)</pre>	Employer (See Instructions	3)
Buyer			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/03/2023	Rutherford, Beth		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77429	· · · · ·	
-	ipation / Job title (See Instructions)	Employer (See Instructions	3)
Buyer			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 35/48 Rpt: 38/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Cy-Fair Rep	ublican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
03/16/2023	Rutherford, Beth		\$40.00
	6 Contributor address; City; State; Zip Code		
2 Dringing ago	Cypress, TX 77429	C - Employer (Coo Instructions	
8 Principal occu Buyer	ipation / Job title (See Instructions)	9 Employer (See Instructions	
_		<u> </u>	Amount of Contribution (\$)
Date 04/11/2023	Full name of contributor out-of-state PAC (ID#: Rutherford, Beth)	Amount of Contribution (\$) \$5.00
04/11/2023			φ3.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77429		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	
Buyer			,
Date	Full name of contributor Out-of-state PAC (ID#:_)	Amount of Contribution (\$)
06/13/2023	Rutherford, Beth		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77429		
-	pation / Job title (See Instructions)	Employer (See Instructions)
Buyer			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/10/2023	Scanlon, Bethany		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	A
Fitness		self)
			Amount of Contribution (\$)
Date 02/14/2023	Full name of contributor out-of-state PAC (ID#: Scanlon, Bethany)	Amount of Contribution (\$) \$5.00
02/14/2020	-		\$0.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
Fitness		self	

			1 Total pagas Cabadula A1;
The Instru	uction Guide explains how to complete	te this form.	1 Total pages Schedule A1: Sch: 36/48 Rpt: 39/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Cy-Fair Rep	publican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state F	PAC (ID#:)	7 Amount of Contribution (\$)
01/10/2023	Schubot, Gail		\$25.00
	6 Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
	upation / Job title (See Instructions)	9 Employer (See Instruction	s)
retired			
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)
03/16/2023			\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
	upation / Job title (See Instructions)	Employer (See Instruction	s)
retired			
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)
02/14/2023	Schubot, Gail		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
-	upation / Job title (See Instructions)	Employer (See Instruction	s)
retired			
Date	Full name of contributor 🔲 out-of-state F	PAC (ID#:)	Amount of Contribution (\$)
05/09/2023	Schubot, Gail		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
	upation / Job title (See Instructions)	Employer (See Instruction	s)
retired			
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)
06/13/2023	Schubot, Gail		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
	upation / Job title (See Instructions)	Employer (See Instruction	s)
retired			

The Instru	iction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 37/48 Rpt: 40/64	
2 FILER NAME			3 Filer ID (Ethics Commission Fil	lers)
	publican Women PAC		00058757	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
06/29/2023	Schubot, Gail			\$50.00
	6 Contributor address; City; State; Zip Code			
	0			
Dringinal occu	Cypress, TX 77433	Employer (See Instructions)		
retired	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
03/23/2023			\$	\$250.00
	Contributor address; City; State; Zip Code			
	Cypress, TX 77433			
Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions))	
		<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/13/2023				\$25.00
	Contributor address; City; State; Zip Code			
	Cypress, TX 77433			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)		
Retired)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
03/16/2023	Smith, Kay	/		\$25.00
00,20,222	Contributor address; City; State; Zip Code			420 .00
1				
	Houston, TX 77095			
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions)		
Operations /	Administrator			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/14/2023	Smith, Kay			\$25.00
1	Contributor address; City; State; Zip Code			
1				
1				
	Houston, TX 77095			
-	upation / Job title (See Instructions)	Employer (See Instructions))	
Operations /	Administrator			
1				

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 38/48 Rpt: 41/64	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	ublican Women PAC		00058757	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
01/19/2023	Smith, Kay			\$40.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77095			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	3)	
Operations A	Administrator			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
04/11/2023	Smith, Kay			\$25.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77095			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Operations A	Administrator			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
05/09/2023	Smith, Kay			\$10.00
	Houston, TX 77095			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Operations A	Administrator			
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/01/2023	Smith, Penny	/		\$25.00
	Contributor address; City; State; Zip Code			
	Fulshear, TX 77441			
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions) 3)	
Retired				
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/02/2023	Smith, Penny	/		\$25.00
	Contributor address; City; State; Zip Code			
	Fulshear, TX 77441			
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	I ;)	
Retired			,	
		<u> </u>		

				—		
7	The Instru	ction Guide explains how to complete	this form.	1	Total pages Schedule A1: Sch: 39/48 Rpt: 42/64	
2 F	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
(Cy-Fair Rep [,]	ublican Women PAC			00058757	
4 [Date	5 Full name of contributor out-of-state PA	AC (ID#:)	7	Amount of Contribution (\$)	
C	02/14/2023	Stuart, Leticia				\$25.00
	I	6 Contributor address; City; State; Zip Code		···		
		1				
		Houston , TX 77095-2978				
		ipation / Job title (See Instructions)	9 Employer (See Instructions	is)		
ŀ	High School	Teacher				
[Date	Full name of contributor out-of-state PA	AC (ID#:)	T	Amount of Contribution (\$)	
(02/14/2023	Stuart, Leticia				\$40.00
	I	Contributor address; City; State; Zip Code		"		
		1				
		1				
		Houston , TX 77095-2978				
		ipation / Job title (See Instructions)	Employer (See Instruction	is)		
ŀ	High School	Teacher				
	Date	Full name of contributor out-of-state PA	AC (ID#:)	Τ	Amount of Contribution (\$)	
(06/13/2023	Stuart, Leticia				\$25.00
	I	Contributor address; City; State; Zip Code	,	"		
		1				
		1				
		Houston , TX 77095-2978				
		upation / Job title (See Instructions)	Employer (See Instructions	ıs)		
ŀ	High School	Teacher				
[Date	Full name of contributor out-of-state PA	AC (ID#:)	Τ	Amount of Contribution (\$)	
(01/10/2023	Thomas, Teresa				\$5.00
	I	Contributor address; City; State; Zip Code		"		
		1				
		Tomball, TX 77377				
		ipation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Retired					
	Date	Full name of contributor out-of-state PA	\C (ID#:)	Τ	Amount of Contribution (\$)	
(06/13/2023	Thomas, Teresa				\$85.00
	I	Contributor address; City; State; Zip Code		Ϊ		
		1				
		Tomball, TX 77377				
		ipation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Retired					

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 40/48 Rpt: 43/64	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	;)
	ublican Women PAC		00058757	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
01/10/2023	Threadgill, Wanda		\$25	5.00
	6 Contributor address; City; State; Zip Code			
	Cypress, TX 77429			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
03/16/2023	Threadgill, Wanda		\$25	5.00
	Contributor address; City; State; Zip Code			
	Cypress, TX 77429			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Retired				
Date	Full name of contributor Out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
02/16/2023	Threadgill, Wanda			5.00
	Cypress, TX 77429			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
04/11/2023	Threadgill, Wanda		\$25	5.00
	Contributor address; City; State; Zip Code			
	Cypress, TX 77429			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
05/09/2023	Threadgill, Wanda			5.00
	Contributor address: City; State; Zip Code			
	Cypress, TX 77429			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions		
Retired				

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 41/48 Rpt: 44/64
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ublican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
06/13/2023	Threadgill, Wanda		\$25.00
	6 Contributor address; City; State; Zip Code		
	Cypress, TX 77429		
-	pation / Job title (See Instructions)	9 Employer (See Instructions	3)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/14/2023	Threadgill, Wanda		\$1,075.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77429		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	8)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/14/2023	Tom Ramsey Campaign		\$1,500.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77255		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/10/2023	Truhlar, Lynda		\$5.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
	pation / Job title (See Instructions)	Employer (See Instructions	3)
Precinct Cha	air 1056	self	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/10/2023	Vinklarek, Sandra		\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
-	pation / Job title (See Instructions)	Employer (See Instructions	5)
Retired			

The Instru	ction Guide explains how to complete thi	s form.	1 Total pages Schedule A1: Sch: 42/48 Rpt: 45/64	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	ublican Women PAC		00058757	,
4 Date	5 Full name of contributor out-of-state PAC (II	D#:)	7 Amount of Contribution (\$)	
02/14/2023	Vinklarek, Sandra			\$25.00
	6 Contributor address; City; State; Zip Code			
	Cypress, TX 77433			
-	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
Retired				
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of Contribution (\$)	
04/11/2023	Vinklarek, Sandra			\$25.00
	Contributor address; City; State; Zip Code			
	Cypress, TX 77433			
	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Retired				
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of Contribution (\$)	
05/09/2023	Vinklarek, Sandra			\$25.00
	Contributor address; City; State; Zip Code		•	
	Cypress, TX 77433			
	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Retired				
Date	Full name of contributor 🔲 out-of-state PAC (II	D#:)	Amount of Contribution (\$)	
06/13/2023	Vinklarek, Sandra			\$25.00
	Contributor address; City; State; Zip Code			
	Cypress, TX 77433			
-	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Retired				
Date	Full name of contributor 🔲 out-of-state PAC (II	D#:)	Amount of Contribution (\$)	
03/16/2023	Walker, kimberly			\$25.00
	Contributor address; City; State; Zip Code			
	Cypress, TX 77433			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
homemaker				
		·		

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 43/48 Rpt: 46/64	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
	ublican Women PAC		00058757	-,
4 Date	5 Full name of contributor out-of-state PAC (ID#	۲:)	7 Amount of Contribution (\$)	
02/14/2023	Zachary, Linda		\$2	25.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77095			
	upation / Job title (See Instructions)	9 Employer (See Instructions)	
bookkeeper				
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
06/13/2023	Zachary, Linda		\$2	25.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77095			
	upation / Job title (See Instructions)	Employer (See Instructions)	
bookkeeper				
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
03/16/2023	bamble, sandra		\$2	25.00
	Contributor address; City; State; Zip Code			
	Cypess, TX 77429			
	upation / Job title (See Instructions)	Employer (See Instructions)	
Public Spea		self		
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
06/13/2023	bramble, sandra		\$8	30.00
	Contributor address; City; State; Zip Code			
	Cypress, TX 77429			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
public speak		self	,	
Date	Full name of contributor out-of-state PAC (ID#		Amount of Contribution (\$)	
04/11/2023	coombs, carole	<i>t</i> /		\$5.00
0 11 2 2 0 2 2	Contributor address; City; State; Zip Code		Ţ	
	Contributor address, City, State, Zip Code			
	houston, TX 77042			
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	;)	
homemaker			,	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 44/48 Rpt: 47/64	
2 FILER NAME			3 Filer ID (Ethics Commission F	-ilers)
	ublican Women PAC		00058757	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
04/11/2023	desforges, cheryl			\$55.00
	6 Contributor address; City; State; Zip Code			
	houston, TX 77040			
	pation / Job title (See Instructions)	9 Employer (See Instructions)	
retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
04/11/2023	desforges, cheryl			\$25.00
	Contributor address; City; State; Zip Code			
	houston, TX 77040			
	pation / Job title (See Instructions)	Employer (See Instructions)	
retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
05/09/2023	desforges, cheryl			\$25.00
	Contributor address; City; State; Zip Code			
	houston, TX 77040			
-	pation / Job title (See Instructions)	Employer (See Instructions)	
retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
03/14/2023	gilmore, linda			\$10.00
	Contributor address; City; State; Zip Code			
	Spring, TX 77381			
	pation / Job title (See Instructions)	Employer (See Instructions		
District Direc	ctor	Congressman Wesley H	luton	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
04/11/2023	johnson, miranda			\$5.00
	Contributor address; City; State; Zip Code			
	cypress, TX 77429			
-	pation / Job title (See Instructions)	Employer (See Instructions)	
homemaker				

Th	e Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 45/48 Rpt: 48/64
2 FILI	ER NAME			3 Filer ID (Ethics Commission Filers)
		ublican Women PAC		00058757
4 Dat	te	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
04/	/11/2023	johnson, miranda		\$55.00
		6 Contributor address; City; State; Zip Code		1
		SUPPOSE TV 77420		
9 Prin	ncinal occu	cypress, TX 77429 pation / Job title (See Instructions)	9 Employer (See Instructions	s)
	memaker			
Dat	te	_)	Amount of Contribution (\$)
03/	/14/2023	kuhn, cheryl		\$5.00
		Contributor address; City; State; Zip Code		1
	· .	houston, TX 77081		
		pation / Job title (See Instructions)	Employer (See Instructions	S)
	altor			I
Dat		Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/	/26/2023	miller, Melanie		\$25.00
		Contributor address; City; State; Zip Code		
		cypress, TX 77429		
Prir	ncipal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	ired			· /
Dat	te	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
	/14/2023	miller, lorraine		\$55.00
		Contributor address; City; State; Zip Code		
		houston, TX 77066		
Prir	ncipal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
reti	ired			
Dat	te	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/	/11/2023	miller, lorraine		\$5.00
		Contributor address; City; State; Zip Code		1
		Cypress, TX 77429		-
		pation / Job title (See Instructions)	Employer (See Instructions	5)
Rei	etired			

			1
The Instru	ction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 46/48 Rpt: 49/64	
2 FILER NAME	-	3 Filer ID (Ethics Commission Filers)	
Cy-Fair Rep	ublican Women PAC		00058757
4 Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7 Amount of Contribution (\$)
04/11/2023	miller, lorraine		\$25.00
	6 Contributor address; City; State; Zip Code		1
	Cypress, TX 77429	D. Employer (Cool Instructions	<u> </u>
8 Principal occu retired	upation / Job title (See Instructions)	9 Employer (See Instructions	5)
			1
Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of Contribution (\$)
04/28/2023			\$25.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77429		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
retired			-,
Date	Full name of contributor Out-of-state PAC (IE)# [.])	Amount of Contribution (\$)
06/13/2023	miller, lorraine	νπ,	\$25.00
	Contributor address; City; State; Zip Code	· · ·	
	Cypress, TX 77429		
	upation / Job title (See Instructions)	Employer (See Instructions	s)
retired			
Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of Contribution (\$)
03/16/2023	morgan, lydia		\$25.00
	Contributor address; City; State; Zip Code]
	cypress, TX 77433		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	c)
homemaker			5)
Date	Full name of contributor out-of-state PAC (IE	\4. \	Amount of Contribution (\$)
03/01/2023	pierce, jaime	<i>)</i> #/	\$5.00
<u> </u>	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
retired			
		•	

The Instru	ction Guide explains how to c	complete this fo	orm.	1	Total pages Schedule A1: Sch: 47/48 Rpt: 50/64	
2 FILER NAME		3	Filer ID (Ethics Commission	Filers)		
Cy-Fair Rep	ublican Women PAC		00058757	-		
4 Date 03/14/2023	5 Full name of contributor our our robin, walter	ut-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$50.00
	6 Contributor address; City; State; Z	ip Code		1		
		· · · · · · · · · · · · · · · · · · ·				
	houston, TX 77081					
8 Principal occurretired	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
Date	Full name of contributor	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
02/14/2023	robin, walter					\$25.00
	Contributor address; City; State; Zi			1		
	houston TX 77004					
Principal occu	houston, TX 77094		Employer (See Instructions	<u> </u>		
self				5)		
Date	Full name of contributor	ut of state BAC (ID#:)	<u> </u>	Amount of Contribution (\$)	
04/11/2023						\$25.00
0 11 11 2020	Contributor address; City; State; Zip Code					\$20.00
	houston, TX 77081					
Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Date	Full name of contributor 🛛 ou	ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
06/13/2023	schumaker, wendi					\$80.00
	Contributor address; City; State; Zi	ip Code				
	cypress, TX 77437					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
retired						
Date	Full name of contributor	ut-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
02/05/2023	stolzenburger, gail					\$5.00
	Contributor address; City; State; Z	ip Code		1		
	Houston, TX 77094					
-	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Retired						

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 48/48 Rpt: 51/64 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Cy-Fair Republican Women PAC 00058757 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 04/11/2023 \$5.00 stolzenburger, gail 6 Contributor address; City; State; Zip Code houston, TX 77094 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$)) 02/16/2023 \$5.00 williams, sonji Contributor address; City; State; Zip Code Cypress, TX 77429 Principal occupation / Job title (See Instructions) Employer (See Instructions) rtired

PLEDGED CONTRIBUTIONS SCHEDULE **B** 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 52/64 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Cy-Fair Republican Women PAC 00058757 4 \$ 0.00 TOTAL OF UNITEMIZED PLEDGES In-kind description 5 Date 6 Full name of pledgor out-of-state PAC (ID#: 8 Amount of 9 1 (If applicable) pledge (\$) 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		SCHEDUL	ЕĒ
The Instruction Guide explains how to complete this form.	1	al pages Schedule E: n: 1/1 Rpt: 53/64	
2 FILER NAME Cy-Fair Republican Women PAC	3 Filer ID 000587	(Ethics Commission F 757	ilers)
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 8 Lender address; City; State; Zip Code financial institution?		10 Interest Rate11 Maturity Date	
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions)	5)		
14 Description of Collateral 15 Check if personal funds we None	ere deposited	d into political account (See Instructions)	
16 GUARANTOR 17 Name of guarantor INFORMATION		19 Amount Guarantee	d (\$)
not applicable 18 Guarantor address; City; State; Zip Code			
20 Principal occupation 21 Employer (See Instructions	6)		

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District - Gift/Awards/Memorials Expense Travel Out of District					
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 1/11 Rpt: 54/64	Cy-Fair Republican Women PAC 00058757					
4 Date 04/04/2023	5 Payee name Crown Trophy					
6 Amount (\$) \$55.21						
Expenditure from corporate funds	Houston, TX 77084-3440					
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense membership name tags 					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
04/07/2023	Crown Trophy					
Amount (\$)	Payee address; City; State; Zip Code					
\$55.21	4492 Hwy 6 N					
Expenditure from corporate funds	Houston, TX 77084-3440					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense name tags 					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
04/19/2023	Crown Trophy					
Amount (\$)	Payee address; City; State; Zip Code					
\$13.80	4492 Hwy 6 N					
Expenditure from corporate funds	Houston, TX 77084-3440					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense name tags 					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee 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: 2/11 Rpt: 55/64	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Cy-Fair Republican Women PAC 00058757				
4 Date	5 Payee name				
06/20/2023	Crown Trophy				
6 Amount (\$) \$13.80	7 Payee address; City; State; Zip Code 4492 Hwy 6 N				
Expenditure from corporate funds	Houston, TX 77084-3440				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE Advertising Expense Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense name badge					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
03/24/2023	Cy-Hope				
Amount (\$)	Payee address; City; State; Zip Code				
\$500.00	12715 Telge Rd				
Expenditure from corporate funds	Cypress, TX 77429				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense student scholarship 				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
04/11/2023	DoubleTree by Hilton Houston Brookhollow				
Amount (\$) \$2,153.62	Payee address; City; State; Zip Code 12801 northwest freeway				
Expenditure from corporate funds	houston, TX 77040				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense april meeting 				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Ot of District					
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 3/11 Rpt: 56/64	Cy-Fair Republican Women PAC 00058757					
4 Date	5 Payee name					
06/28/2023						
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$108.25	8418 Bondale					
Expenditure from corporate funds	Houston, TX 77040					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.					
	Check if Austin, TX, officeholder living expense					
	business cards					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
04/12/2023	Grand Tuscany Hotel					
Amount (\$)	Payee address; City; State; Zip Code					
\$2,153.62						
Expenditure from						
corporate funds	Houston, TX 77040					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food 					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
02/08/2023	Hobby Lobby					
Amount (\$)	Payee address; City; State; Zip Code					
\$51.83	26060 290 West					
Expenditure from corporate funds	Cypress, TX 77070					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense decorations 					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic: Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District By - Gift/Awards/Memorials Expense Printing Expense Travel Out of District	ment & Related Expense				
1 Total pages Schedule F1:	.: 2 FILER NAME 3 Filer ID (Et	thics Commission Filers)				
Sch: 4/11 Rpt: 57/64						
4 Date 05/02/2023						
6 Amount (\$) \$23.97	\$23.97 26060 290 West					
corporate funds	Cypress, TX 77070					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O						
Date	Payee name					
02/23/2023	InkDots					
Amount (\$) \$85.78						
Expenditure from corporate funds	Houston, TX 77095					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Check if Austin, TX, officeholder living expension business cards					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH					
Date	Payee name					
01/10/2023	Longwood Golf Club					
Amount (\$) \$618.11	Payee address; City; State; Zip Code 13300 Longwood Trace Drive 13300 Longwood Trace Drive					
Expenditure from corporate funds	Cypress, TX 77429					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Check if Austin, TX, officeholder living expendence Jan 23 meeting					
Complete <u>ONLY</u> if direct expenditure to benefit C/O						

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Glft/Awards/Memorials Expense Printing Expense Travel Out of District					
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 5/11 Rpt: 58/64	Cy-Fair Republican Women PAC 00058757					
4 Date 03/14/2023	5 Payee name Longwood Golf Club					
6 Amount (\$) \$598.62	\$598.62 13300 Longwood Trace Drive					
corporate funds	Cypress, TX 77429					
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense march general meeting 					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
02/14/2023	Longwood Golf Club					
Amount (\$)	Payee address; City; State; Zip Code					
\$615.60	13300 Longwood Trace Drive					
Expenditure from corporate funds	Cypress, TX 77429					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Feb meeting 					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
06/13/2023	NFRW Trust					
Amount (\$)	Payee address; City; State; Zip Code					
\$50.00	124 N. Alfred St					
Expenditure from corporate funds	Alexandria, VA 22314					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense donation 					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Rep Fees Office Ov Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)				
Sch: 6/11 Rpt: 59/64	Cy-Fair Republican Women PAC						
4 Date	5 Payee name						
05/05/2023	Office Depot Office Max						
6 Amount (\$)	7 Payee address; City; State; Zip Co	de					
\$104.53	25825 Hwy 290						
Expenditure from corporate funds	Cypress, TX 77433						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description					
OF EXPENDITURE	Printing Expense		de of Texas. Complete Schedule T.				
			officeholder living expense				
		sponsor packets					
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	aht	Office held				
expenditure to benefit C/OF		gin					
Date	Payee name						
01/03/2023	Party City						
Amount (\$)	Payee address; City; State; Zip Co	de					
\$21.65	28640 Hwy 290						
φ21.00	20040111119230						
Expenditure from corporate funds	cypress, TX 77443						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		de of Texas. Complete Schedule T. officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held				
Date	Payloo namo						
06/29/2023	Payee name Party City						
		-1 -					
Amount (\$)	Payee address; City; State; Zip Co	de					
\$76.35	6452 FM 1960 west						
Expenditure from corporate funds	houston, TX 77069						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		de of Texas. Complete Schedule T. officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held				

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
1 Total pages Schedule F1:					
1 Total pages Schedule F1: Sch: 7/11 Rpt: 60/64	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Cy-Fair Republican Women PAC 00058757				
4 Date	5 Payee name				
01/03/2023	Quicken				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$45.34	3760 Haven Avenue				
Expenditure from corporate funds	Menlo Park, CA 94025				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF Accounting/Banking Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Software					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
06/30/2023	Square, Inc.				
Amount (\$)	Payee address; City; State; Zip Code				
\$70.36 1455 Market Street, Suite 600					
Expenditure from corporate funds	San Francisco, CA 94103				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense credit cards 				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
05/18/2023	Sterling Country Club				
Amount (\$)	Payee address; City; State; Zip Code				
\$702.17	16500 Houston National Blvd				
Expenditure from corporate funds	Houston, TX 77095				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense venue charge 				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment Fees Office Overhead/ Food/Beverage Expense Polling Expense - Gitt/Awards/Memorials Expense Printing Expense	VReimbursement Rental Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Contract Labor OTHER (enter a category not listed above)				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 8/11 Rpt: 61/64	Cy-Fair Republican Women PAC	00058757				
4 Date	5 Payee name					
05/18/2023	Sterling Country Club					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$500.00	16500 Houston National Blvd					
Expenditure from corporate funds						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description				
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense deposit				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held				
Date	Payee name					
05/24/2023	Sterling Country Club					
Amount (\$)	Payee address; City; State; Zip Code					
\$702.17	\$702.17 16500 Houston National Blvd					
Expenditure from corporate funds	Houston, TX 77095					
PURPOSE OF EXPENDITURE	OF Check if travel outside of Texas, Complete Schedule T.					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held				
Date	Payee name					
01/25/2023	Storage King USA					
Amount (\$)	Payee address; City; State; Zip Code					
\$420.00	8135 Jackrabbit Rd					
Expenditure from corporate funds	Houston, TX 77095					
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense storeroom rental				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens ittee Legal Services The Instruction Guide ex		Office Over Polling Exp Printing Exp Salaries/Wa	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 F	ILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 9/11 Rpt: 62/64		Cy-Fair Republican Women PAC	2				00058757
4	Date 05/03/2023		5 Payee name TFRW					
6 Amount (\$) 7 Payee address; City; \$125.00 13740 N. Highway 183 Ste J4					; Zip Coo	de		
	Expenditure from corporate funds		Austin, TX 78750-1832					
8	 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense membership fees 				, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	Jht		Office held
	Date	F	Payee name					
	03/27/2023	1	he Dictionary Project					
	Amount (\$)	F	Payee address; City;	State;	; Zip Coo	de		
	\$528.00 P.O. Box 1845							
	Expenditure from corporate funds Charleston, SC 29402							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Sift/Awards/Memorials Expense		edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense DNARIES
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice soug	yht		Office held
	Date	F	Payee name					
	01/17/2023		ValMart					
	Amount (\$) \$8.40		Payee address; City; 2353 FM 1960 West	State;	; Zip Coo	de		
	Expenditure from corporate funds	ŀ	louston, TX 77065					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top o Accounting/Banking	of this sch	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	Jht		Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 10/11 Rpt: 63/64	Cy-Fair Republican Women PAC 00058757		
4 Date 04/10/2023	5 Payee name Walmart		
6 Amount (\$) \$36.35	7 Payee address; City; State; Zip Code 26270 Northwest Fwy		
corporate funds	Cypress, TX 77929		
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense decorations 		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
05/02/2023	Walmart		
Amount (\$)	Payee address; City; State; Zip Code		
\$53.69	26270 Northwest Fwy		
Expenditure from corporate funds	Cypress, TX 77429		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense party favors 		
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office held Office held			
Date	Payee name		
01/19/2023	peters, stephanie		
Amount (\$)	Payee address; City; State; Zip Code		
\$375.00	124 Indigo Ct		
Expenditure from corporate funds	Magnolia, TX 77355		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense bus trip 		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		

	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Food/Beverage Expense Pollin y - Gift/Awards/Memorials Expense Printi al Committee Legal Services Salar	Repayment/Reimbursement Solicitation/Fundraising Expense Overhead/Rental Expense Transportation Equipment & Related Expense rg Expense Travel in District ng Expense Travel Out of District ies/Wages/Contract Labor OTHER (enter a category not listed above)	
The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 11/11 Rpt: 64/64	Cy-Fair Republican Women PAC	00058757	
4 Date	5 Payee name		
01/27/2023	the grand tuscany		
6 Amount (\$)	7 Payee address; City; State; Zip	Code	
\$2,900.00	12801 northwest frwy		
Expenditure from corporate funds	houston, TX 77040		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense deposit	
		deposit	
O Complete ONUM	Condidate/Offical-states		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		sought Office held	