



# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12</b> COMMITTEE NAME Georgetown Area Republican Women PAC	<b>13</b> Filer ID (Ethics Commission Filers) 00054333
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<b>14</b> COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15</b> CONTRIBUTION TOTALS	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b>	\$ 520.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$ 4,930.73
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 3,666.20
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 22,545.73
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 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.

Beverly A. Kohnert  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - GPAC

<b>17 COMMITTEE NAME</b> Georgetown Area Republican Women PAC		<b>18 Filer ID</b> (Ethics Commission Filers) 00054333
<b>19 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,930.73
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,666.20
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/25 Rpt: 4/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 04/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baer, Trish <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78633	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Law Manager		<b>9</b> Employer (See Instructions)
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baer, Trish <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$23.18
Principal occupation / Job title (See Instructions) Business Law Manager		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bagley, Georgia <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barbosa, Vicki <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$142.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barbosa, Vicki <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$23.18
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/25 Rpt: 5/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 05/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beatty, Melody <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78628	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beatty, Melody <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bolton, Sarah <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$) \$23.18
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bolton, Sarah <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bolton, Sarah <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$) \$12.51
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/25 Rpt: 6/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bolton, Sarah <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78633	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bruchmiller, Sarah <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$57.04
Principal occupation / Job title (See Instructions) District Judge		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bruchmiller, Sarah <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) District Judge		Employer (See Instructions)
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bygum, Huldah (Beth-Anne) <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$39.50
Principal occupation / Job title (See Instructions) VP, Chief Security Officer		Employer (See Instructions)
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Callender, Rachel <hr/> Contributor address; City; State; Zip Code  Cedar Park, TX 78630	Amount of Contribution (\$)  \$10.50
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/25 Rpt: 7/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cavarretta, Kim Mary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78633	<b>7</b> Amount of Contribution (\$)  \$28.52
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cavarretta, Kim Mary <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chiles, Meredith <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633-4810	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chiles, Meredith <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633-4810	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Covey, Valerie <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$39.50
Principal occupation / Job title (See Instructions) Williamson County Commissioner		Employer (See Instructions) Williamson County

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/25 Rpt: 8/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 05/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeVillez, Sue <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78633	<b>7</b> Amount of Contribution (\$)  \$28.52
<b>8</b> Principal occupation / Job title (See Instructions) Retired Nurse		<b>9</b> Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeVillez, Sue <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$38.00
Principal occupation / Job title (See Instructions) Retired Nurse		Employer (See Instructions)
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeVillez, Sue <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired Nurse		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeVillez, Sue <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired Nurse		Employer (See Instructions)
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeVillez, Sue <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired Nurse		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/25 Rpt: 9/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeVillez, Sue <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78633	<b>7</b> Amount of Contribution (\$)  \$39.50
<b>8</b> Principal occupation / Job title (See Instructions) Retired Nurse		<b>9</b> Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doran, Anne (Patricia) <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$39.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doran, Anne (Patricia) <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$46.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doss, Jade <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78626	Amount of Contribution (\$)  \$12.51
Principal occupation / Job title (See Instructions) Field Representative		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doss, Jade <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78626	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Field Representative		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/25 Rpt: 10/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 05/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eisner, Amanda <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78633	<b>7</b> Amount of Contribution (\$)  \$28.52
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eisner, Amanda <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eisner, Amanda <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$23.18
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fairbrother, Bill <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78680	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Chairman Williamson County Republican Party		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Forse, Phillis <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78626	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/25 Rpt: 11/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Forse, Phillis <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78626	<b>7</b> Amount of Contribution (\$)  \$154.00
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Agent		<b>9</b> Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Foster, Bonnie <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frazier, LaVonne <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$26.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frazier, LaVonne <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Friedrich, Susan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759	Amount of Contribution (\$)  \$12.51
Principal occupation / Job title (See Instructions) TFRW Treasurer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/25 Rpt: 12/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Friedrich, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78759	<b>7</b> Amount of Contribution (\$)  \$12.51
<b>8</b> Principal occupation / Job title (See Instructions) TFRW Treasurer		<b>9</b> Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gibson, Shmeka (Dr.) <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78665	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Grant Writer, Psychologist		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grimes, Laura Paige <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78626	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Manage Law Practice		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grimes, Laura Paige <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78626	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Manage Law Practice		Employer (See Instructions)
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grimes, Laura Paige <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78626	Amount of Contribution (\$)  \$23.18
Principal occupation / Job title (See Instructions) Manage Law Practice		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/25 Rpt: 13/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/24/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gutierrez, Brenda <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78633	<b>7</b> Amount of Contribution (\$)  \$39.50
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris, Caroline <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78664	Amount of Contribution (\$)  \$10.50
Principal occupation / Job title (See Instructions) HD 52 Candidate		Employer (See Instructions)
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrison, Julie <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$23.18
Principal occupation / Job title (See Instructions) SVP Human Resources		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrison, Julie <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) SVP Human Resources		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrison, Julie <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$12.00
Principal occupation / Job title (See Instructions) SVP Human Resources		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/25 Rpt: 14/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrison, Julie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78628	<b>7</b> Amount of Contribution (\$)  \$12.51
<b>8</b> Principal occupation / Job title (See Instructions) SVP Human Resources		<b>9</b> Employer (See Instructions)
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hobbs, Dee <hr/> Contributor address; City; State; Zip Code  Hutto, TX 78634	Amount of Contribution (\$)  \$231.00
Principal occupation / Job title (See Instructions) Asst. County Attorney		Employer (See Instructions) Williamson County
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holcomb, Corby <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$57.04
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holcomb, Corby <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$92.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holliman, Kathleen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78708-0486	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Hollidaze

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/25 Rpt: 15/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holliman, Kathleen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78708-0486	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Hollidaze
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holliman, Kathleen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78708-0486	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Hollidaze
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jarvis, Paula <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jett, Sonya <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Carol <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$23.18
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/25 Rpt: 16/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Carol <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78633	<b>7</b> Amount of Contribution (\$)  \$28.52
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Juhasz, JoAnn <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Killebrew, Carolyn <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kirklin, Sherri <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78626	Amount of Contribution (\$)  \$12.51
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kohnert, Beverly <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/25 Rpt: 17/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 05/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kohnert, Beverly <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78628	<b>7</b> Amount of Contribution (\$)  \$10.50
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Large, Nancy <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$26.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lichtenstein, Anne <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$23.18
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lichtenstein, Anne <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lindemann, Matt <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78627	Amount of Contribution (\$)  \$175.00
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/25 Rpt: 18/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Madsen, Judith <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78633	<b>7</b> Amount of Contribution (\$)  \$28.52
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCloskey, Michael <hr/> Contributor address; City; State; Zip Code  Cedar Park, TX 78630	Amount of Contribution (\$)  \$19.45
Principal occupation / Job title (See Instructions) Director Of Sales		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McDaniel, Linda <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McDaniel, Linda <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McLean, Evelyn <hr/> Contributor address; City; State; Zip Code  Jarrell, TX 78627	Amount of Contribution (\$)  \$39.50
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/25 Rpt: 19/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Messinger, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Pflugerville, TX 78660	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Assistant State Prosecuting Attorney		<b>9</b> Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Messinger, John <hr/> Contributor address; City; State; Zip Code  Pflugerville, TX 78660	Amount of Contribution (\$)  \$12.51
Principal occupation / Job title (See Instructions) Assistant State Prosecuting Attorney		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morgan, Jennifer <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Director Donor Interest		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morgan, Jennifer <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Director Donor Interest		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murray, Kathryn <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/25 Rpt: 20/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 05/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Noble, Dixsie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78633	<b>7</b> Amount of Contribution (\$)  \$28.52
<b>8</b> Principal occupation / Job title (See Instructions) Retired Banker		<b>9</b> Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Noble, Dixsie <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Retired Banker		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Noble, Dixsie <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$38.00
Principal occupation / Job title (See Instructions) Retired Banker		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Leary, Maggie <hr/> Contributor address; City; State; Zip Code  Austin, TX 78724	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Owens, Allison <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) mgmt		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/25 Rpt: 21/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 05/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, Donna <hr/> <b>6</b> Contributor address; City; State; Zip Code  Round Rock, TX 78681	<b>7</b> Amount of Contribution (\$)  \$28.52
<b>8</b> Principal occupation / Job title (See Instructions) Broker		<b>9</b> Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Peloquin, Coeta <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Peloquin, Coeta <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$38.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Potosky, Jackie <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Potosky, Jackie <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/25 Rpt: 22/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 05/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rister, Nancy E.	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78628	
<b>8</b> Principal occupation / Job title (See Instructions) Williamson County County Clerk		<b>9</b> Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Anastasia (Stacey)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, Terri	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) Store Manager		Employer (See Instructions)
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, Terri	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) Store Manager		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, Terri	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) Store Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/25 Rpt: 23/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, Terri <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78628	<b>7</b> Amount of Contribution (\$)  \$12.51
<b>8</b> Principal occupation / Job title (See Instructions) Store Manager		<b>9</b> Employer (See Instructions)
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, Terri <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$23.18
Principal occupation / Job title (See Instructions) Store Manager		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ross, Janice <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ross, Terry <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$23.18
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanchez, Leticia <hr/> Contributor address; City; State; Zip Code  Leander, TX 78641	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/25 Rpt: 24/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 05/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schorre, Susan	<b>7</b> Amount of Contribution (\$)  \$28.52
<b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78633		
<b>8</b> Principal occupation / Job title (See Instructions) retired administrative support		<b>9</b> Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smit, Jennifer	Amount of Contribution (\$)  \$19.45
Contributor address; City; State; Zip Code  Georgetown, TX 78633		
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stade, Silvia	Amount of Contribution (\$)  \$28.52
Contributor address; City; State; Zip Code  Georgetown, TX 78626		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stade, Silvia	Amount of Contribution (\$)  \$39.50
Contributor address; City; State; Zip Code  Georgetown, TX 78626		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stade, Silvia	Amount of Contribution (\$)  \$102.50
Contributor address; City; State; Zip Code  Georgetown, TX 78626		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/25 Rpt: 25/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sweeney, Kathy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78633	<b>7</b> Amount of Contribution (\$)  \$38.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sweeney, Kathy <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sweeney, Kathy <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Templeton, Jennifer <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) 911 Dispatcher		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Templeton, Jennifer <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$12.51
Principal occupation / Job title (See Instructions) 911 Dispatcher		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/25 Rpt: 26/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Templeton, Jennifer <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78633	<b>7</b> Amount of Contribution (\$)  \$102.75
<b>8</b> Principal occupation / Job title (See Instructions) 911 Dispatcher		<b>9</b> Employer (See Instructions)
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Templeton, Jennifer <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$23.18
Principal occupation / Job title (See Instructions) 911 Dispatcher		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Triggs, Cynthia <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Triggs, Cynthia <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Triggs, Cynthia <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$46.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/25 Rpt: 27/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 05/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tucker, Donna <hr/> <b>6</b> Contributor address; City; State; Zip Code  Round Rock, TX 78681	<b>7</b> Amount of Contribution (\$)  \$26.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tucker, Donna <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78681	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tucker, Donna <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78681	Amount of Contribution (\$)  \$23.18
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilkie, Gigi <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$28.52
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Samantha <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633	Amount of Contribution (\$)  \$12.51
Principal occupation / Job title (See Instructions) Health Coach		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/25 Rpt: 28/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilson, Terry <hr/> <b>6</b> Contributor address; City; State; Zip Code  Taylor, TX 76574	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) State Representative		<b>9</b> Employer (See Instructions)

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule B:  
Sch: 1/1 Rpt: 29/39

**2** FILER NAME  
Georgetown Area Republican Women PAC

**3** Filer ID (Ethics Commission Filers)  
00054333

**4** TOTAL OF UNITEMIZED PLEDGES

**\$** 0.00

**5** Date

**6** Full name of pledgor  out-of-state PAC (ID#: \_\_\_\_\_)

**8** Amount of  
pledge (\$)

**9** In-kind description  
(If applicable)

**7** Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

**10** Principal occupation / Job title (See Instructions)

**11** Employer (See Instructions)

# LOANS

## SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 30/39
<b>2</b> FILER NAME Georgetown Area Republican Women PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b> 0.00
<b>5</b> Date of loan	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	<b>9</b> Loan Amount (\$)
<b>6</b> Is lender a financial institution?	<b>8</b> Lender address; City; State; Zip Code	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions)		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral <input type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION <input type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/9 Rpt: 31/39	<b>2</b> FILER NAME Georgetown Area Republican Women PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00054333
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<b>4</b> Date 06/21/2023	<b>5</b> Payee name Constant Contact
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<b>6</b> Amount (\$) \$179.04  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1601 Trapelo Road, Suite 329  Waltham, MA 02451
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Online Marketing Application	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Marketing Application
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/27/2023	Payee name Eventbrite
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Amount (\$) \$19.08  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 155 5th St, 7th Floor  San Francisco, CA 94103
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Event Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/18/2023	Payee name Eventbrite
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Amount (\$) \$113.49  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 155 5th St, 7th Floor  San Francisco, CA 94103
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Event Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/9 Rpt: 32/39	<b>2</b> FILER NAME Georgetown Area Republican Women PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/15/2023	<b>5</b> Payee name Eventbrite	
<b>6</b> Amount (\$) \$92.50  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 155 5th St, 7th Floor  San Francisco, CA 94103	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Event Fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/25/2023	Payee name Eventbrite	
Amount (\$) \$38.16  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 155 5th St, 7th Floor  San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Event Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2023	Payee name FLAG ALL IN FOR AMERICA	
Amount (\$) \$223.80  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 301 E Lemon St., Suite B  Tarpon Springs , FL 34689	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Literacy Projects	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Literacy Projects
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/9 Rpt: 33/39	<b>2</b> FILER NAME Georgetown Area Republican Women PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00054333
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<b>4</b> Date 05/22/2023	<b>5</b> Payee name GTX Awards and Engraving
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<b>6</b> Amount (\$) \$47.63  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 202 South Austin Avenue Suite 104  Georgetown, TX 78626
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Nametags	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Nametags
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/27/2023	Payee name GTX Awards and Engraving
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Amount (\$) \$47.63  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 202 South Austin Avenue Suite 104  Georgetown, TX 78626
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Nametags	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Nametags
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/23/2023	Payee name Georgetown Chamber of Commerce
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Amount (\$) \$350.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1 Chamber Way  Georgetown, TX 78626
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Conference Room Rental
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/9 Rpt: 34/39	<b>2</b> FILER NAME Georgetown Area Republican Women PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 06/26/2023	<b>5</b> Payee name Georgetown Chamber of Commerce	
<b>6</b> Amount (\$) \$350.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1 Chamber Way  Georgetown, TX 78626	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Conference Room Rental
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/22/2023	Candidate/Officeholder name Schlotzsky's	
Amount (\$) \$632.22  <input type="checkbox"/> Expenditure from corporate funds	Office sought 601 S I-35 Frontage Rd,  Georgetown, TX 78626	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Catered Lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/20/2023	Candidate/Officeholder name Schlotzsky's	
Amount (\$) \$562.90  <input type="checkbox"/> Expenditure from corporate funds	Office sought 601 S I-35 Frontage Rd,  Georgetown, TX 78626	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Catered Lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/9 Rpt: 35/39	<b>2</b> FILER NAME Georgetown Area Republican Women PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00054333
<b>4</b> Date 04/27/2023	<b>5</b> Payee name Square, Inc.	
<b>6</b> Amount (\$) \$0.62  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 500 Enterprise Drive Suite 500  Flower Mound, TX 75028	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/18/2023	Payee name Square, Inc.	
Amount (\$) \$4.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 Enterprise Drive Suite 500  Flower Mound, TX 75028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2023	Payee name Square, Inc.	
Amount (\$) \$6.47  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 Enterprise Drive Suite 500  Flower Mound, TX 75028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/9 Rpt: 36/39	<b>2</b> FILER NAME Georgetown Area Republican Women PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00054333
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<b>4</b> Date 06/15/2023	<b>5</b> Payee name Square, Inc.
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<b>6</b> Amount (\$) \$9.04  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 500 Enterprise Drive Suite 500  Flower Mound, TX 75028
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Fees
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/22/2023	Payee name Square, Inc.
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Amount (\$) \$1.45  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 Enterprise Drive Suite 500  Flower Mound, TX 75028
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/23/2023	Payee name Square, Inc.
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Amount (\$) \$1.45  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 Enterprise Drive Suite 500  Flower Mound, TX 75028
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/9 Rpt: 37/39	<b>2</b> FILER NAME Georgetown Area Republican Women PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00054333
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<b>4</b> Date 06/24/2023	<b>5</b> Payee name Square, Inc.
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<b>6</b> Amount (\$) \$1.45  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 500 Enterprise Drive Suite 500  Flower Mound, TX 75028
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Fees
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/29/2023	Payee name Square, Inc.
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Amount (\$) \$21.33  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 Enterprise Drive Suite 500  Flower Mound, TX 75028
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/30/2023	Payee name Square, Inc.
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Amount (\$) \$5.38  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 Enterprise Drive Suite 500  Flower Mound, TX 75028
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/9 Rpt: 38/39	<b>2</b> FILER NAME Georgetown Area Republican Women PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00054333
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<b>4</b> Date 05/10/2023	<b>5</b> Payee name TFRW PAC
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<b>6</b> Amount (\$) \$126.50  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 13741 North Highway 183 Suite J4  Austin, TX 78750
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Membership Dues	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/23/2023	Payee name TFRW PAC
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Amount (\$) \$126.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13741 North Highway 183 Suite J4  Austin, TX 78750
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Membership Dues	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/23/2023	Payee name TFRW PAC
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Amount (\$) \$177.10  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13741 North Highway 183 Suite J4  Austin, TX 78750
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Membership Dues	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/9 Rpt: 39/39	<b>2</b> FILER NAME Georgetown Area Republican Women PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00054333
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<b>4</b> Date 06/26/2023	<b>5</b> Payee name TFRW PAC
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<b>6</b> Amount (\$) \$101.20  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 13741 North Highway 183 Suite J4  Austin, TX 78750
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Membership Dues	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/28/2023	Payee name The Golden Rule
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Amount (\$) \$159.90  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 606 South Church St.  Georgetown, TX 78626
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Appetizers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/26/2023	Payee name The Golden Rule
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Amount (\$) \$267.36  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 606 South Church St.  Georgetown, TX 78626
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Appetizers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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