GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form		1 Filer ID (Ethics Commission Filers) 00065537		2 Total pages filed: 20		
3	COMMITTEE NAME					OFFICE USE ONLY		
	Hill Country Texas	Democratic Women						
	2							
						07/11/2023		
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; 0	CITY	; STATE; ZIP CODE				
	ADDRESS	P.O. Box 293014				Date Hand-delivered or Date Postmarked		
						Date manufuenvereu of Date Postiniarkeu		
	Change of Address	Kerrville, TX 78029-3014				Receipt # Amount		
						Date Processed		
						Dale Flucesseu		
						Date Imaged		
						Date mageu		
5	CAMPAIGN	MS/MRS/MR FIRST				MI		
ľ	TREASURER							
	NAME	Mr. David M.						
		NICKNAME LAST				SUFFIX		
		Smith						
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CIT	Y;	STATE; ZIP CODE		
	TREASURER	101 E. Park Blvd., Ste. 600						
	STREET ADDRESS							
		Diana TX 75074						
_	(Residence or Business)	Plano, TX 75074						
7	CAMPAIGN TREASURER	STREET OR PO BOX;		APT / SUITE #; CI	TY;	STATE; ZIP CODE		
	MAILING	101 E. Park Blvd., Ste. 600						
	ADDRESS							
		Plano, TX 75074						
_	Change of Address							
8	CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	E	XTENSION				
	PHONE	(972) 516-3849						
9	REPORT	January 15	30th	n day before election		Dissolution (Attach PAC-DR)		
	TYPE		0+6	day before election		10th day after compaign traceurer		
		X July 15	out	day before election		10th day after campaign treasurer termination		
			Run	off				
10	PERIOD	Month Day Year		Month Da	v	Year		
1_0	COVERED	01/01/2023	тнг	ROUGH 06/30/2				
		01/01/2023		00/30/2	023			
11				ELECTION TYPE				
	ELECTION	ELECTION DATE Month Day Year	1	_		Other		
				mary Runoff				
			Ge	eneral Special				
		-	-					
		1 I I						
		G) Т <i>і</i>	O PAGE 2				
For	rms provided by Tex	kas Ethics Commission www	eth	ics.state.tx.us		Version V3.5.1.a18ea2ca		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Hill Country Texas Dem	nocratic Women		00065537	,
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	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	5,178.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,106.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	878.60
	4. TOTAL POLITICA	L EXPENDITURES	\$	6,182.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	2,943.83
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of pe true and correct and includes all inforr under Title 15, Election Code.		
		Mr. David	d M. Smith	
		Signature of Car	mpaign Treasu	rer
	STAMP / SEAL ABOVE			
		, tł	nis the	day
of	_, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offic	er administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V3.5.1.a18ea2ca

FORM GPAC COVER SHEET PG 3 3 of 20

17 COMM	<i>I</i> ITTE	E NAME	18 Filer ID	(Ethics Commission Filers)		
Hill Co	ountr	y Texas Democratic Women	00065537			
		SUBTOTALS		SUBTOTAL AMOUNT		
NAME	OFS	SCHEDULE				
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 7,106.00		
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
3.			\$			
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 ORGA	ANIZATION	\$		
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$		
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	RGANIZATION	\$		
9.		SCHEDULE E: LOANS		\$		
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$ 6,182.00		
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$		
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
14.	Х	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$ 300.00		
15.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$ 103.92		

SUBTOTALS - GPAC

The Ins	struction Guide explains ho	w to complete this f	form.	1 Total pages Schedule A1: Sch: 1/11 Rpt: 4/20
2 FILER N	AME			3 Filer ID (Ethics Commission Filers)
	ntry Texas Democratic Women			00065537
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
01/03/20				\$17.00
	6 Contributor address; City;			
	Kerrville, TX 78028			
8 Principal	occupation / Job title (See Instructio	ns)	9 Employer (See Instructions	I 6)
Artist		,		,
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/30/20	023 Arr, Audra			\$50.00
	Contributor address; City;			
	Kerrville, TX 78028			<u> </u>
Principal Artist	occupation / Job title (See Instructio	ns)	Employer (See Instructions	5)
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/08/20				\$17.00
	Contributor address; City;	State; Zip Code		
	Kerrville, TX 78028			
Principal	occupation / Job title (See Instructio	ns)	Employer (See Instructions	5)
Artist				
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/04/20	,	—		\$34.00
	Contributor address; City;	State; Zip Code		
	Kerrville, TX 78028			
	occupation / Job title (See Instructio	ns)	Employer (See Instructions	5)
Artist				1
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/03/20				\$20.00
	Contributor address; City;	State; Zip Code		
	Kerrville, TX 78028			
Principal	occupation / Job title (See Instructio	ns)	Employer (See Instructions	<u> </u>
retired		- /	none	,

The Instruction Guide explains how to complete this form.	T
	1 Total pages Schedule A1: Sch: 2/11 Rpt: 5/20
FILER NAME	3 Filer ID (Ethics Commission Filers)
Hill Country Texas Democratic Women	00065537
Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
02/08/2023 Dreyer, Carolyn	\$17.00
6 Contributor address; City; State; Zip Code	1
Kerrville, TX 78028	
Principal occupation / Job title (See Instructions) 9 Employer (See Instructions	5)
retired none	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/15/2023 Dreyer, Carolyn	\$50.00
Contributor address; City; State; Zip Code	1
Kerrville, TX 78028	
Principal occupation / Job title (See Instructions) Employer (See Instructions	5)
retired none	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/02/2023 Dreyer, Carolyn	\$17.00
Contributor address; City; State; Zip Code	1
Kerrville, TX 78028	
Principal occupation / Job title (See Instructions) Employer (See Instructions	5)
retired none	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/03/2023 Ertel, Stephanie	\$67.00
Contributor address; City; State; Zip Code	1
Mountain Home, TX 78058	
Principal occupation / Job title (See Instructions) Employer (See Instructions	5)
	5)
Principal occupation / Job title (See Instructions) Employer (See Instructions	s) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) retired none Date Full name of contributor out-of-state PAC (ID#:) 02/08/2023 Ertel, Stephanie	
Principal occupation / Job title (See Instructions) Employer (See Instructions) retired none Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) retired none Date Full name of contributor out-of-state PAC (ID#:) 02/08/2023 Ertel, Stephanie	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) retired none Date Full name of contributor out-of-state PAC (ID#:) 02/08/2023 Ertel, Stephanie Contributor address; City; State; Zip Code	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) retired none Date Full name of contributor out-of-state PAC (ID#:) 02/08/2023 Ertel, Stephanie Contributor address; City; State; Zip Code Mountain Home, TX 78058	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) retired none Date Full name of contributor out-of-state PAC (ID#:) 02/08/2023 Ertel, Stephanie Contributor address; City; State; Zip Code	Amount of Contribution (\$) . \$17.00

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/11 Rpt: 6/20	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Hill Country	Texas Democratic Women			00065537	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	03/08/2023	Ertel, Stephanie				\$17.00
		6 Contributor address; City; State; Zip Code				
		Mountain Home, TX 78058				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	retired		none			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	04/04/2023	Ertel, Stephanie				\$17.00
		Contributor address; City; State; Zip Code		1		
		Mountain Home, TX 78058	1 _ · /2 · · ·	Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	retired		none			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/02/2023	Ertel, Stephanie				\$17.00
		Contributor address; City; State; Zip Code				
		Mountain Home, TX 78058				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ג)		
	retired		none	-)		
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	01/30/2023	Ferguson, Judy	/			\$125.00
	01,00,1010	Contributor address; City; State; Zip Code				+==0100
			ſ			
		Kerrville, TX 78028	ſ			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	educator		none			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/03/2023	Fitch, Diane (Dr.)				\$62.00
		Contributor address; City; State; Zip Code		1		
			ſ			
			ſ			
		Kerrville, TX 78028-8865				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	therapist		self			

SCHEDULE	A1
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				_		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/11 Rpt: 7/20	
2	FILER NAME			3	-	n Filers)
	Hill Country	Texas Democratic Women			00065537	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	02/08/2023	Fitch, Diane (Dr.)				\$17.00
		6 Contributor address; City; State; Zip Code		1		
_	<u> </u>	Kerrville, TX 78028-8865	1	Ĺ		
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	therapist		self	—		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	04/04/2023					\$17.00
		Contributor address; City; State; Zip Code				
		Kerrville, TX 78028-8865				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	therapist		self	"		
╞				Γ	Amount of Contribution (\$)	
	Date 05/02/2023	Full name of contributor out-of-state PAC (ID#: Fitch, Diane (Dr.)	J		Amount of Contribution (\$)	\$17.00
	0010212020	Contributor address; City; State; Zip Code		ł		Ψ11.00
		Contributor address, City, State, Zip Code				
		Kerrville, TX 78028-8865				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)		
	therapist		self			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/08/2023	Fontenot, Sarah				\$100.00
		Contributor address; City; State; Zip Code	1	1		
		Fradeviationum TV 79624				
┡	Dringinal acci	Fredericksburg, TX 78624 upation / Job title (See Instructions)	Employer (See Instructions			
	Public speak			5)		
╞			<u> </u>		Amount of Contribution (\$)	
	Date 03/16/2023	Full name of contributor out-of-state PAC (ID#: Fontenot, Sarah)		Amount of Contribution (\$)	\$50.00
	00/10/2020	Contributor address; City; State; Zip Code		ł		Ψ00.00
		Contributor address, City, State, Zip Code				
		Fredericksburg, TX 78624				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Public speak	ker				
┢			1			

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	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 5/11 Rpt: 8/20
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Hill Country	Texas Democratic Women		00065537
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	01/03/2023	Jones, Mary		\$17.00
		6 Contributor address; City; State; Zip Code		1
		Kerrville, TX 78028		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
ľ	retired		none	5)
╞				Arround of Questility (A)
	Date 01/12/2023	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	01/12/2023			\$50.00
		Contributor address; City; State; Zip Code		
		Kerrville, TX 78028		
⊢	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	(e
	retired		none	5)
╞				Amount of Contribution (ft)
	Date 02/08/2023	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$) \$17.00
	02/06/2023	Jones, Mary		\$17.00
		Contributor address; City; State; Zip Code		
		Kerrville, TX 78028		
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ls)
	retired		none	
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
	04/04/2023	Jones, Mary)	\$17.00
	0 0 2020	Contributor address; City; State; Zip Code		
		Kerrville, TX 78028		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	retired		none	
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	01/03/2023	Kinneberg, Roberta S.		\$47.00
		Contributor address; City; State; Zip Code		
		Kerrville, TX 78028-8249		
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	homemaker		none	
⊢				

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 6/11 Rpt: 9/20
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Hill Country	Texas Democratic Women		00065537
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
02/08/2023	Kinneberg, Roberta S.		\$17.00
	6 Contributor address; City; State; Zip Code		1
- · · ·	Kerrville, TX 78028-8249	- · · · · · · · · · · · · · · · · · · ·	
-		9 Employer (See Instructions	3)
homemaker		none	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/08/2023	Kinneberg, Roberta S.		\$17.00
	Contributor address; City; State; Zip Code]
	Kerrville, TX 78028-8249		<u> </u>
-	pation / Job title (See Instructions)	Employer (See Instructions	\$)
homemaker		none	<u></u>
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/04/2023	Kinneberg, Roberta S.		\$17.00
	Contributor address; City; State; Zip Code]
	Karnvilla TV 70029 0240		
Dringing agou	Kerrville, TX 78028-8249		
Principal occu homemaker	ipation / Job title (See Instructions)	Employer (See Instructions none	3)
			1
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/02/2023	Kinneberg, Roberta S.		\$17.00
	Contributor address; City; State; Zip Code		
	Kerrville, TX 78028-8249		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	e)
homemaker	,	none	<i>,</i> ,
			Amount of Contribution (\$)
Date 01/03/2023	Full name of contributor out-of-state PAC (ID#: Lay, Lynn)	Amount of Contribution (\$) \$17.00
01/03/2023			ψ17.00
	Contributor address; City; State; Zip Code		
	Ingram, TX 78025		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
retired		none	"

				_		
The Instru	ction Guide explains hov	v to complete this f	form.	1	Total pages Schedule A1: Sch: 7/11 Rpt: 10/20	
2 FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Texas Democratic Women			ľ	00065537	T lier5)
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
01/24/2023	Lay, Lynn					\$50.00
	6 Contributor address; City; S	tate; Zip Code		1		
	Ingram, TX 78025					
	pation / Job title (See Instruction	s)	9 Employer (See Instructions	s)		
retired			none			
Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
02/08/2023	Lay, Lynn					\$17.00
	Contributor address; City; S			1		
	Ingram, TX 78025		-			
Principal occu	pation / Job title (See Instruction	S)	Employer (See Instructions	s)		
retired			none			
Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
03/08/2023	Lay, Lynn					\$17.00
	Contributor address; City; S	tate; Zip Code		1		
	Ingram, TX 78025					
Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	s)		
retired			none			
Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
04/04/2023	Lay, Lynn					\$17.00
	Contributor address; City; S	tate; Zip Code		1		
	Ingram, TX 78025					
Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	s)		
retired			none			
Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
05/02/2023	Lay, Lynn					\$17.00
	Contributor address; City; S	tate; Zip Code		1		
	Ingram, TX 78025					
	pation / Job title (See Instruction	S)	Employer (See Instructions	s)		
retired			none			

	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/11 Rpt: 11/20	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
[Texas Democratic Women			-	00065537	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	01/03/2023	Lewis, Sarah	—				\$42.00
		 6 Contributor address; City; Sta 					
		· · · · · · · · · · · · · · · · · · ·					
		Kerrville, TX 78028					
8	Principal occu	pation / Job title (See Instructions))	9 Employer (See Instructions)		
	Stay-at-hom	e mom					
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	04/04/2023	Lewis, Sarah		······································			\$51.00
		Contributor address; City; Sta					
		Kerrville, TX 78028					
⊢	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions)		
	Stay-at-hom				,		
⊢			<u> </u>				
	Date Full name of contributor out-of-state PAC (ID#:) 05/02/2023 Lewis, Sarah)		Amount of Contribution (\$)		
						\$17.00	
	Contributor address; City; State; Zip Code						
	Kerrville, TX 78028						
		pation / Job title (See Instructions))	Employer (See Instructions)		
	Stay-at-hom	e mom					
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	03/17/2023	Lipp, Susan					\$200.00
		Contributor address; City; Sta	ate; Zip Code				
		Center Point, TX 78010-54	439				
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions)		
	Marketing M	anager					
⊨	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/08/2023	Schuler, Eugenia					\$34.00
		Contributor address; City; Sta	ato: Zin Codo				
		Contributor address, City, St	ale, Zip Code				
		Kerrville, TX 78028					
⊢	Princinal occu	pation / Job title (See Instructions))	Employer (See Instructions	<u> </u>		
	retired		,	none)		
┡	icuicu			none			

The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 9/11 Rpt: 12/20	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
	Texas Democratic Women		00065537	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
03/08/2023	Schuler, Eugenia		\$37.	.00
	6 Contributor address; City; State; Zip Code			
	Kerrville, TX 78028	1		
	pation / Job title (See Instructions)	9 Employer (See Instructions)	
retired		none		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
04/04/2023	Schuler, Eugenia		\$17.	.00
	Contributor address; City; State; Zip Code			
	Kerrville, TX 78028		-	
	pation / Job title (See Instructions)	Employer (See Instructions)	
retired		none		
Date	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
05/02/2023	Schuler, Eugenia		\$17.	.00
	Contributor address; City; State; Zip Code			
	Kerrville, TX 78028	1		
Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	•)	
		none		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/03/2023	Sentell, Julie S.		\$20.	.00
	Contributor address; City; State; Zip Code			
	Kerrville, TX 78028			
Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
retired		none)	
Date 02/08/2023	Full name of contributor out-of-state PAC (ID#: Sentell, Julie S.)	Amount of Contribution (\$) \$20.	-00
0210012023			ψ2.0.	.00
	Contributor address; City; State; Zip Code			
	Kerrville, TX 78028			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
retired		none)	
100100				

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 10/11 Rpt: 13/20	
2 FILER NAME			3 Filer ID (Ethics Commission Fi	ilers)
	Texas Democratic Women		00065537	11013)
4 Date	Date 5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$)	
03/08/2023	Sentell, Julie S.			\$20.00
	6 Contributor address; City; State; Zip Code			
	Kerrville, TX 78028			
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)	
retired		none		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
04/04/2023	Sentell, Julie S.			\$40.00
	Kerrville, TX 78028			
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions		
retired		none	,	
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)	
05/02/2023	Sentell, Julie S.	/		\$20.00
05/02/2025				φ20.00
	Contributor address; City; State; Zip Code			
	Kerrville, TX 78028			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
retired		none	5)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	÷ · = 00
02/08/2023	Smith, Linda			\$17.00
	Contributor address; City; State; Zip Code			
Duin singly a set	Kerrville, TX 78028		<u> </u>	
	ipation / Job title (See Instructions)	Employer (See Instructions	S)	
retired		none		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
02/27/2023	Smith, Linda			\$20.00
	Contributor address; City; State; Zip Code			
	Kerrville, TX 78028			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)	
retired		none		

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 11/11 Rpt: 14/20
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		Texas Democratic Women		00065537
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	04/04/2023	Smith, Linda		\$17.00
		6 Contributor address; City; State; Zip Code		
		Kerrville, TX 78028		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	
	retired		none	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	05/02/2023	Smith, Linda		\$51.00
		Contributor address; City; State; Zip Code		
		Kerrville, TX 78028		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	retired		none	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	01/03/2023 Summerlin, Mary (Ellen) (Mrs.) Contributor address; City; State; Zip Code		\$120.00	
		Kenrrville, TX 78028		
		pation / Job title (See Instructions)	Employer (See Instructions	
	Retired		none	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	03/10/2023	Summerlin, Mary (Ellen) (Mrs.)		\$52.00
		Contributor address; City; State; Zip Code		
⊢		Kenrrville, TX 78028		
		pation / Job title (See Instructions)	Employer (See Instructions	5)
	Retired		none	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	05/02/2023	Summerlin, Mary (Ellen) (Mrs.)		\$20.00
		Contributor address; City; State; Zip Code		
		Konrollo TX 79029		
\vdash	Duineir - L	Kenrrville, TX 78028		
		pation / Job title (See Instructions)	Employer (See Instructions	5)
	Retired		none	

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/Politica Credit Card Payment					
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
Sch: 1/3 Rpt: 15/20	Hill Country Texas Democratic Women 00065537				
4 Date 01/03/2023	5 Payee name Rails Café at the Depot				
6 Amount (\$) \$935.28	7 Payee address; City; State; Zip Code 615 E. Schreiner Street				
corporate funds	Kerrville, TX 78028				
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meals for 48 attendees plus sales tax at the 1-3-2023 luncheon meeting 				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
02/07/2023	Rails Café at the Depot				
Amount (\$)	Payee address; City; State; Zip Code				
\$779.40	615 E. Schreiner Street				
Expenditure from corporate funds	Kerrville, TX 78028				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meals for 45 attendees plus sales tax at the 2-7-2023 luncheon meeting 				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
03/07/2023	Rails Café at the Depot				
Amount (\$) \$969.92	Payee address; City; State; Zip Code 615 E. Schreiner Street				
Expenditure from corporate funds	Kerrville, TX 78028				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meals for 56 attendees plus sales tax at the 3-7-2023 luncheon meeting 				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	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/Politica Credit Card Payment	Fees Of Food/Beverage Expense Pr Gift/Awards/Memorials Expense Pr I Committee Legal Services Sa	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Sch: 2/3 Rpt: 16/20	Hill Country Texas Democratic Women		00065537		
4 Date	5 Payee name	I			
04/04/2023	Rails Café at the Depot				
6 Amount (\$)	7 Payee address; City; State; Z	ip Code			
\$779.40	615 E. Schreiner Street				
Expenditure from corporate funds	Kerrville, TX 78028				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedul	e) (b) Description			
OF EXPENDITURE	Food/Beverage Expense	Check if travel o	utside of Texas. Complete Schedule T.		
			TX, officeholder living expense		
		luncheon mee	attendees plus sales tax at the 4-4-2023 eting		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		e sought	Office held		
Date	Payee name				
05/02/2023	Rails Café at the Depot				
Amount (\$)	Payee address; City; State; Z	ip Code			
\$779.40	615 E. Schreiner Street				
Expenditure from corporate funds	Kerrville, TX 78028				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Food/Beverage Expense	Check if travel o	nutside of Texas. Complete Schedule T. TX, officeholder living expense attendees plus sales tax at the 5-2-2023 eting		
Complete <u>ONLY</u> if direct expenditure to benefit C/O		e sought	Office held		
Date	Payee name				
02/19/2023	Texas Democratic Women				
Amount (\$)	Payee address; City; State; Z	ip Code			
\$480.00	c/o Mary Morrison, TDW Treasurer				
	5823 Doliver Drive				
Expenditure from corporate funds	Houston, TX 77057				
PURPOSE		e) (b) Description			
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Fees	Check if travel o Check if Austin, Payment of T	utside of Texas. Complete Schedule T. TX, officeholder living expense DW's share of Hill Country Chapter s collected from Jan.1 - Feb. 19, 2023		
Complete <u>ONLY</u> if direct expenditure to benefit C/O		e 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/Politica Credit Card Payment	Fees Offic Food/Beverage Expense Pollin - Gift/Awards/Memorials Expense Print	Repayment/Reimbursement Solicitation/Fundraising Expense c) Verhead/Rental Expense Transportation Equipment & Related Expense ig Expense Travel in District or complete this form. OTHER (enter a category not listed above)			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filer	rs)		
Sch: 3/3 Rpt: 17/20	Hill Country Texas Democratic Women	00065537			
4 Date	5 Payee name				
04/01/2023	Texas Democratic Women				
6 Amount (\$)	7 Payee address; City; State; Zip	Code			
\$290.00	c/o Mary Morrison, TDW Treasurer				
	5823 Doliver Drive				
Expenditure from corporate funds	Houston, TX 77057				
8 PURPOSE		(b) Description			
OF	(a) Category (See Categories listed at the top of this schedule) Fees	Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE		Check if Austin, TX, officeholder living expense			
		Payment of TDW's share of Hill Country Chapter			
		member dues collected from Feb. 20 - Mar. 31, 2	2023		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		sought Office held			
Date	Payee name				
05/31/2023	Texas Democratic Women				
Amount (\$)	Payee address; City; State; Zip	Code			
\$250.00 c/o Mary Morrison, TDW Treasurer					
Expenditure from corporate funds	5823 Doliver Drive Houston, TX 77057				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.			
	Check if Austin, TX, officeholder living expense				
		Payment of TDW's share of Hill Country Chapter member dues collected from April 1 - May 31, 20			
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		sought Office held			
Date	Payee name				
05/24/2023	Texas Democratic Women				
Amount (\$)	Payee address; City; State; Zip	Code			
\$40.00	c/o Mary Morrison, TDW Treasurer				
	5823 Doliver Drive				
Expenditure from corporate funds	Houston, TX 77057				
•					
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense			
		Annual TDW chapter fee			
Complete <u>ONLY</u> if direct expenditure to benefit C/O		sought Office held			

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE |

Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
Sch: 1/2 Rpt:	Hill Country Texas Democratic Women	00065537		
Date	5 Payee name			
01/02/2023	Smith, David			
Amount (\$)	7 Payee Address; City; State; Zip			
50.00	101 E. Park Blvd., Suite 600			
- Expenditure from				
corporate funds	Plano, TX 75074			
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) compliance consultation and campaign finance report preparation		
Date	Payee name			
02/07/2023	Smith, David			
Amount (\$)	Payee Address; City; State; Zip			
50.00	101 E. Park Blvd., Suite 600			
Expenditure from				
corporate funds	Plano, TX 75074			
PURPOSE OF		(b) Description (See instructions regarding type of information required.		
EXPENDITURE	Accounting/Banking	compliance consultation and campaign finance report preparation		
Date	Payee name			
03/07/2023	Smith, David			
Amount (\$)	Payee Address; City; State; Zip			
	101 E. Park Blvd., Suite 600			
50.00 Expenditure from				
corporate funds	Plano, TX 75074			
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.)		
OF EXPENDITURE	Accounting/Banking	compliance consultation and campaign finance		
		report preparation		
Data				
Date 04/05/2023	Payee name Smith, David			
	· · ·			
Amount (\$)	Payee Address; City; State; Zip 101 E. Park Blvd., Suite 600			
50.00	IOI E. Park Bivu., Suite 000			
Expenditure from corporate funds	Plano, TX 75074			
		(b) Description (See instructions regarding type of information required.)		
OF	Accounting/Banking	compliance consultation and campaign finance		
EXPENDITURE report preparation				

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.					
Total pages Schedule I: Sch: 2/2 Rpt:	2 FILER NAME Hill Country Texas Democratic Women	3 Filer ID (Ethics Commission Filer: 00065537			
Date 05/02/2023	5 Payee name Smith, David	·			
Amount (\$) 50.00 Expenditure from corporate funds	 7 Payee Address; City; State; Zip 101 E. Park Blvd., Suite 600 Plano, TX 75074 				
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories Accounting/Banking	 (b) Description (See instructions regarding type of information required compliance consultation and campaign finance report preparation 			
Date 06/04/2023	Payee name Smith, David				
Amount (\$) 50.00 Expenditure from	Payee Address; City; State; Zip 101 E. Park Blvd., Suite 600				
corporate funds PURPOSE OF EXPENDITURE	Plano, TX 75074 (a) Category (See instructions for examples of acceptable categories Accounting/Banking	 (b) Description (See instructions regarding type of information required compliance consulting and campaign finance repor preparation 			

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instruction (Juide explains how to complete this form			pages Schedule K: I/1 Rpt: 20/20		
2	Hill Country Texas Democratic Women 00065					D (Ethics Commission Filers) 5537
			Name of person from whom amount is received Rails Café			8 Amount (\$) \$103.92
		6	Address of person from whom amount is received; City; State; Zip Code			
		7	Kerrville, TX 78028 Purpose for which amount is received Check if p	- 114		iteria estare da fila
		ľ	Refund of overpayment of catering charge for 1/3/23 meeting	olitio	cal cont	ribution returned to filer