FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00070138 3 COMMITTEE NAME **OFFICE USE ONLY** Women In November Date Received **ELECTRONICALLY FILED** 07/06/2023 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 15918 Cavendish Date Hand-delivered or Date Postmarked Change of Address Houston, TX 77059 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Sherrie L. NAME NICKNAME LAST **SUFFIX** Matula STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 15918 Cavendish STREET **ADDRESS** (Residence or Business) Houston, TX 77059 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 15918 Cavendish MAILING **ADDRESS** Houston, TX 77059 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 502-7320 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2023 06/30/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Women In Novembe	r		00070138	
14 COMMITTEE ACTIVITY	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		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
		Б. Орросси		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS Not check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,625.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	39,140.42
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	87,691.08
OUTSTANDING LOAN TOTALS	I	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT			'	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Mrs. Sherri	e L. Matula	
		Signature of Car	npaign Treasur	er
AFFIX NOTA	RY STAMP / SEAL ABOVE			
		, th	is 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 office	er administering oath
2.9		and the second s	3. 3.110.	g out.

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			3 of 21
17 COMMIT	TEE NAME In November	18 Filer ID 00070138	(Ethics Commission Filers)
	ILE SUBTOTALS		
	F SCHEDULE		SUBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 2,625.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	1	\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 39,140.42
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

MONE	TARY POLITICAL CONTRIBUT	SCHEDULE A1	
The Inst	ruction Guide explains how to complete thi	is form.	1 Total pages Schedule A1: Sch: 1/14 Rpt: 4/21
2 FILER NAM Women Ir	ME November		3 Filer ID (Ethics Commission Filers) 00070138
4 Date 01/31/202	5 Full name of contributor out-of-state PAC (I		7 Amount of Contribution (\$) \$10.00
	Minneapolis, MN 55414	1	
8 Principal od cook	ccupation / Job title (See Instructions)	9 Employer (See Instructions Seward	5)
Date 02/28/202	_ I	D#:)	Amount of Contribution (\$) \$10.00
Principal o	Minneapolis, MN 55414 ccupation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
cook		Seward	•
Date 05/18/202	Full name of contributor out-of-state PAC (I Blain III, James Contributor address; City; State; Zip Code	D#:)	Amount of Contribution (\$) \$50.00
	Seabrook, TX 77586		
Principal od retired	cupation / Job title (See Instructions)	Employer (See Instructions none	s)
Date 01/31/202	1	D#:)	Amount of Contribution (\$) \$100.00
Principal o	ccupation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Executive		Game Show Network	
Date 02/28/202		D#:)	Amount of Contribution (\$) \$100.00
	1	Employer (See Instructions	I .

	MONEI	ARY POLITICAL (SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 2/14 Rpt: 5/21	
2	FILER NAME Women In N	ovember			3	Filer ID (Ethics Commission 00070138	n Filers)
4	Date 03/26/2023	5 Full name of contributor Friesen, Jaimeson6 Contributor address; City; Si			7	Amount of Contribution (\$)	\$100.00
8	Principal occu Executive	San Francisco, CA 94107 pation / Job title (See Instructions	5)	Employer (See Instructions Game Show Network) s)		
	Date 04/26/2023	Full name of contributor Friesen, Jaimeson Contributor address; City; Si	·)		Amount of Contribution (\$)	\$100.00
	Principal occu Executive	San Francisco, CA 94107 pation / Job title (See Instructions		Employer (See Instructions Game Show Network	<u> </u> s)		
	Date 05/26/2023	Full name of contributor Friesen, Jaimeson Contributor address; City; Si	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$100.00
	Deinsinal assu	San Francisco, CA 94107		Faralayay (Caa laakuyatia na	<u></u>		
	Executive	pation / Job title (See Instructions	5)	Employer (See Instructions Game Show Network	5)		
	Date 06/30/2023	Full name of contributor Friesen, Jaimeson Contributor address; City; Si San Francisco, CA 94107	·			Amount of Contribution (\$)	\$100.00
	Principal occu Executive	pation / Job title (See Instructions	s)	Employer (See Instructions Game Show Network	5)		
	Date 02/28/2023	Full name of contributor Griffith, Idona Contributor address; City; Si Austin, TX 78759	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$25.00
	Principal occu Not employe	pation / Job title (See Instructions d	5)	Employer (See Instructions Not employed	s)		
							

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/14 Rpt: 6/21	
2	FILER NAME Women In N			3	Filer ID (Ethics Commission 00070138	Filers)
4	Date 01/31/2023	 Full name of contributor out-of-state PAC (ID#:_ Guttman, Stephanie Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$25.00
_		Austin, TX 78735				
8	Principal occu Marketing	pation / Job title (See Instructions)	9 Employer (See Instructions) Rabbet)		
	Date 01/31/2023	Full name of contributor out-of-state PAC (ID#:_ Guttman, Stephanie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Austin, TX 78735 pation / Job title (See Instructions)	Employer (See Instructions)		
	Marketing		Rabbet			
	Date 02/28/2023	Full name of contributor out-of-state PAC (ID#:_ Guttman, Stephanie Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
		Austin, TX 78735				
	Principal occu Marketing	pation / Job title (See Instructions)	Employer (See Instructions Rabbet)		
	Date 02/28/2023	Full name of contributor out-of-state PAC (ID#:_ Guttman, Stephanie Contributor address; City; State; Zip Code Austin, TX 78735			Amount of Contribution (\$)	\$10.00
	Principal occu Marketing	pation / Job title (See Instructions)	Employer (See Instructions Rabbet)		
	Date 03/26/2023	Full name of contributor out-of-state PAC (ID#:_ Guttman, Stephanie Contributor address; City; State; Zip Code Austin, TX 78735)		Amount of Contribution (\$)	\$25.00
	Principal occu Marketing	pation / Job title (See Instructions)	Employer (See Instructions Rabbet)		

N	MONET	ARY POLITICAL CON	SCHEDULE A1		
Т	he Instru	ction Guide explains how to co	emplete this form.	1 Total pages Schedule A1: Sch: 4/14 Rpt: 7/21	
	ILER NAME Vomen In N	ovember		3 Filer ID (Ethics Commission Filers) 00070138	
4 C	Pate 3/26/2023	Guttman, Stephanie	of-state PAC (ID#:) Code	7 Amount of Contribution (\$) \$10.00	
0 5	winainal aan	Austin, TX 78735	O Familia var (Coo Instruction		
	rıncıpaı occu 1arketing	pation / Job title (See Instructions)	9 Employer (See Instruction Rabbet	s)	
	eate 4/26/2023	Guttman, Stephanie Contributor address; City; State; Zip	of-state PAC (ID#:) Code	Amount of Contribution (\$) \$25.00	
P	rincipal occu	Austin, TX 78735 pation / Job title (See Instructions)	Employer (See Instruction	<u> </u> s)	
N	/larketing		Rabbet		
	eate 4/26/2023	Full name of contributor out- Guttman, Stephanie Contributor address; City; State; Zip	of-state PAC (ID#:) Code	Amount of Contribution (\$) \$10.00	
		Austin, TX 78735			
	rincipal occu Narketing	pation / Job title (See Instructions)	Employer (See Instruction Rabbet	s)	
	ate 5/26/2023	Full name of contributor out- Guttman, Stephanie Contributor address; City; State; Zip Austin, TX 78735	of-state PAC (ID#:) Code	Amount of Contribution (\$) \$25.00	
	rincipal occu Marketing	pation / Job title (See Instructions)	Employer (See Instruction Rabbet	I s)	
	ate	Full name of contributor out-	of-state PAC (ID#:)	Amount of Contribution (\$)	
0	5/26/2023	Guttman, Stephanie Contributor address; City; State; Zip Austin, TX 78735	Code		
	rincipal occu	pation / Job title (See Instructions)	Employer (See Instruction	<u> </u> s)	

	MONET	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE	E A1	
	The Instruc	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 5/14 Rpt: 8/21		
2	FILER NAME Women In N	ovember			3	Filer ID (Ethics Commission 00070138	Filers)	
4	Date 06/30/2023	 Full name of contributor)	7	Amount of Contribution (\$)	\$25.00	
	Dringing Loon	Austin, TX 78735	•	Employer (See Instructions	<u></u>			
8	Marketing	pation / Job title (See Instructions)	9	Employer (See Instructions Rabbet	5)			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Guttman, Stephanie Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00	
	Dringing! goog	Austin, TX 78735	_	Employer (See Instructions	<u></u>			
	Marketing	pation / Job title (See Instructions)		Employer (See Instructions Rabbet	·)			
	Date 01/31/2023	Full name of contributor out-of-state PAC (ID#:_ Hallenbeck, Robert Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00	
		Houston, TX 77019						
	Principal occu Manager	pation / Job title (See Instructions)		Employer (See Instructions Waste Management	5)			
	Date 02/28/2023	Full name of contributor out-of-state PAC (ID#:_Hallenbeck, Robert Contributor address; City; State; Zip Code Houston, TX 77019)	•	Amount of Contribution (\$)	\$25.00	
	Principal occu Manager	pation / Job title (See Instructions)		Employer (See Instructions Waste Management	5)			
	Date 03/26/2023	Full name of contributor out-of-state PAC (ID#:_Hallenbeck, Robert Contributor address; City; State; Zip Code Houston, TX 77019				Amount of Contribution (\$)	\$25.00	
	Principal occu Manager	pation / Job title (See Instructions)		Employer (See Instructions Waste Management	5)			
	<u>_</u>							

	MONEI	ONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains hov	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/14 Rpt: 9/21		
2	FILER NAME Women In N	ovember			3	Filer ID (Ethics Commission 00070138	n Filers)	
4	Date 04/26/2023	5 Full name of contributor Hallenbeck, Robert6 Contributor address; City; S	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$25.00	
8	Principal occu Manager	Houston, TX 77019 pation / Job title (See Instructions	s)	9 Employer (See Instructions Waste Management	 s)			
	Date 05/26/2023	Full name of contributor Hallenbeck, Robert Contributor address; City; S Houston, TX 77019	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$25.00	
	Principal occu Manager	pation / Job title (See Instructions	5)	Employer (See Instructions Waste Management	<u>l</u> S)			
	Date 06/30/2023	Full name of contributor Hallenbeck, Robert Contributor address; City; S	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$25.00	
	Principal occu	Houston, TX 77019 pation / Job title (See Instructions	<u> </u>	Employer (See Instructions	<u>''</u>			
	Manager	pation / 300 title (See Instructions)	Waste Management	·)			
Date 06/30/2023		Full name of contributor Harari, Sara Contributor address; City; S New Haven, CT 06511	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$120.00	
	Principal occu Not Employe	pation / Job title (See Instructions	5)	Employer (See Instructions Not Employed	<u>l</u> S)			
	Date 01/31/2023	Full name of contributor Kasten, Nancy Contributor address; City; S Dallas, TX 75229-5560	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$25.00	
	Principal occu not employed	pation / Job title (See Instructions d	s)	Employer (See Instructions none	5)			

	MONEI	ONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 7/14 Rpt: 10/21		
2	FILER NAME Women In N	ovember			3	Filer ID (Ethics Commission 00070138	Filers)	
4	Date 02/28/2023	5 Full name of contributor Kasten, Nancy6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$25.00	
8	Principal occu not employe	Dallas, TX 75229-5560 pation / Job title (See Instructions) d	9	Employer (See Instructions none	5)			
	Date 03/26/2023	Full name of contributor Kasten, Nancy Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$)	\$25.00	
	Dallas, TX 75229-5560 Principal occupation / Job title (See Instructions) not employed			Employer (See Instructions none	<u> </u> 5)			
	Date 04/26/2023	Full name of contributor Kasten, Nancy Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code			Amount of Contribution (\$)	\$25.00	
		Dallas, TX 75229-5560			<u> </u>			
	not employe	pation / Job title (See Instructions) d		Employer (See Instructions none	5)			
Date 05/26/2023		Full name of contributor Kasten, Nancy Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$)	\$25.00	
	Principal occu	Dallas, TX 75229-5560 pation / Job title (See Instructions) d		Employer (See Instructions none	<u> </u> 5)			
	Date 06/30/2023	Full name of contributor Kasten, Nancy Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$)	\$25.00	
	Principal occu not employe	pation / Job title (See Instructions) d		Employer (See Instructions none	5)			

	MONEI	ONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instru	ction Guide explains how to cor	nplete this form	m.	1	Total pages Schedule A1: Sch: 8/14 Rpt: 11/21		
2	FILER NAME Women In N	ovember			3	Filer ID (Ethics Commission 00070138	Filers)	
4	Date 01/31/2023	Keegan, Heather 6 Contributor address; City; State; Zip (of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$25.00	
8	Principal occu Attorney	The Woodlands, TX 77382 pation / Job title (See Instructions)		Employer (See Instructions Lone Star Legal Aid	5)			
	Date 02/28/2023	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00	
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Lone Star Legal Aid	5)			
	Date 03/26/2023	Keegan, Heather Contributor address; City; State; Zip (of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00	
	•	The Woodlands, TX 77382 pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Date 04/26/2023	Full name of contributor out-on the contributor address; City; State; Zip of the Woodlands, TX 77382	of-state PAC (ID#:	Lone Star Legal Aid		Amount of Contribution (\$)	\$25.00	
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Lone Star Legal Aid	()			
	Date 05/26/2023	Full name of contributor out-on teegan, Heather Contributor address; City; State; Zip of the Woodlands, TX 77382	of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00	
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Lone Star Legal Aid)			
			•					

	MONEI	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUI	E A1	
	The Instruc	ction Guide explains hov	v to complete this fo	rm.	1	Total pages Schedule A1: Sch: 9/14 Rpt: 12/21		
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)	
	Women In N					00070138		
4	Date 06/30/2023	5 Full name of contributorKeegan, Heather6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$25.00	
		The Woodlands, TX 7738						
8	Principal occu	pation / Job title (See Instructions	s) 9	Employer (See Instructions	s)			
	Attorney			Lone Star Legal Aid				
	Date 01/31/2023	Full name of contributor Morian, Sarah Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00	
		Houston, TX 77005	,		Ĺ			
		pation / Job title (See Instructions	5)	Employer (See Instructions				
	Executive			DX Service Company Ir	ıc.			
	Date 01/31/2023	Full name of contributor Riggs, Carolyn P. Contributor address; City; S	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$10.00	
		Houston, TX 77044						
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>. </u>			
	Not Employe	ed		Not Employed				
	Date	Full name of contributor	out-of-state PAC (ID#:	\	Г	Amount of Contribution (\$)		
	01/31/2023	Riggs, Carolyn P. Contributor address; City; S Houston, TX 77044				(v)	\$5.00	
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)			
	Not Employe	ed		Not Employed				
	Date 02/28/2023	Full name of contributor Riggs, Carolyn P.	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00	
		Contributor address; City; S Houston, TX 77044	tate; Zip Code		•			
	Principal occu Not Employe	pation / Job title (See Instructions ed	5)	Employer (See Instructions Not Employed	5)			

	MONEI	ONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/14 Rpt: 13/21		
2	FILER NAME Women In N	ovember			3	Filer ID (Ethics Commission 00070138	ı Filers)	
4	Date 02/28/2023	5 Full name of contributor Riggs, Carolyn P.6 Contributor address; City; S			7	Amount of Contribution (\$)	\$5.00	
8	Principal occu Not Employe	Houston, TX 77044 pation / Job title (See Instructionsed	s) <u> </u>	Employer (See Instructions Not Employed	5)			
	Date 03/26/2023	Full name of contributor Riggs, Carolyn P. Contributor address; City; S Houston, TX 77044	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$10.00	
	Principal occupation / Job title (See Instructions) Not Employed		5)	Employer (See Instructions Not Employed	5)			
	Date 03/26/2023	Full name of contributor Riggs, Carolyn P. Contributor address; City; S	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$5.00	
		Houston, TX 77044	,	5 1 (0 1 1 1	Ĺ			
	Not Employe	pation / Job title (See Instructions ed	b) 	Employer (See Instructions Not Employed	>)			
Date 04/26/2023		Full name of contributor Riggs, Carolyn P. Contributor address; City; S Houston, TX 77044	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00	
	Principal occu Not Employe	pation / Job title (See Instructions	5)	Employer (See Instructions Not Employed	<u> </u> 			
	Date 04/26/2023	Full name of contributor Riggs, Carolyn P. Contributor address; City; S Houston, TX 77044	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$5.00	
	Principal occu Not Employe	pation / Job title (See Instructions ed	s)	Employer (See Instructions Not Employed	s)			

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 11/14 Rpt: 14/21		
2	FILER NAME Women In N	lovember		3	Filer ID (Ethics Commission 00070138	n Filers)	
4	Date 05/26/2023 5 Full name of contributor out-of-state PAC (ID#:) Riggs, Carolyn P. 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$10.00		
8	Principal occu	Houston, TX 77044 pation / Job title (See Instructions)	9 Employer (See Instructions	<u>s)</u>			
Ŭ	Not Employe		Not Employed	٠,			
	Date Full name of contributor out-of-state PAC (ID#:) 05/26/2023 Riggs, Carolyn P. Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$5.00		
	Principal occu	Houston, TX 77044 pation / Job title (See Instructions)	Employer (See Instructions	5) 			
	Not Employe		Not Employed)			
	Date 06/30/2023	Full name of contributor	ID#:)		Amount of Contribution (\$)	\$10.00	
		Houston, TX 77044	<u> </u>				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	5)			
Contributor address; City; State; Zip Code		Riggs, Carolyn P.	ID#:)		Amount of Contribution (\$)	\$5.00	
		Employer (See Instructions	<u> </u>				
Not Employed		ed	Not Employed				
	Date 01/31/2023	Full name of contributor out-of-state PAC (I Roberts, Matthew Contributor address; City; State; Zip Code Las Cruces, NM 88011	ID#:)	•	Amount of Contribution (\$)	\$5.00	
		pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Software En	gineer	General Dynamics				

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 12/14 Rpt: 15/21	
2	FILER NAME Women In N	lovember		1	Filer ID (Ethics Commission 00070138	Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Roberts, Matthew 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$5.00	
_	Deinainal agai	Las Cruces, NM 88011	C Franks on (Cook last west in one			
8	Software En	pation / Job title (See Instructions) gineer	9 Employer (See Instructions General Dynamics	S)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/26/2023 Roberts, Matthew Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00	
	Principal occu	Las Cruces, NM 88011 pation / Job title (See Instructions)	Employer (See Instructions	s)		
Software Engineer			General Dynamics			
Date Full name of contributor out-of-state PAC (ID#:_04/26/2023 Roberts, Matthew Contributor address; City; State; Zip Code		(ID#:)		Amount of Contribution (\$)	\$5.00	
		Las Cruces, NM 88011				
Principal occupation / Job title (See Instructions) Software Engineer			Employer (See Instructions General Dynamics	s)		
05/26/2023 Roberts, Matthew		Roberts, Matthew	(ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu	Las Cruces, NM 88011 pation / Job title (See Instructions)	Employer (See Instructions	6)		
Software Engineer			General Dynamics	3)		
	Date 06/30/2023	Full name of contributor out-of-state PAC Roberts, Matthew Contributor address; City; State; Zip Code Las Cruces, NM 88011	(ID#:)		Amount of Contribution (\$)	\$5.00
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Software En	gineer	General Dynamics			

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/14 Rpt: 16/21	
2	FILER NAME Women In N			3	Filer ID (Ethics Commission 00070138	Filers)
4	Date 01/31/2023 5 Full name of contributor out-of-state PAC (ID#:) Stensland, Jamy 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$5.00	
_	Deinsinal	North Bend, WA 98045	In Frankrick (On the training			
8	Counselor	pation / Job title (See Instructions)	9 Employer (See Instructions DSHS)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/28/2023 Stensland, Jamy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00	
	Principal occu	North Bend, WA 98045 pation / Job title (See Instructions)	Employer (See Instructions			
	Counselor	pation / Job title (See Instructions)	DSHS	<i>)</i>		
Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00	
		North Bend, WA 98045				
	Principal occu Counselor	pation / Job title (See Instructions)	Employer (See Instructions DSHS)		
	Date 04/26/2023	Full name of contributor out-of-state PAC (ID#:_ Stensland, Jamy Contributor address; City; State; Zip Code North Bend, WA 98045			Amount of Contribution (\$)	\$5.00
			Employer (See Instructions DSHS)		
	Date Full name of contributor out-of-state PAC (ID#:) 05/26/2023 Stensland, Jamy Contributor address; City; State; Zip Code North Bend, WA 98045			Amount of Contribution (\$)	\$5.00	
	Principal occu Counselor	pation / Job title (See Instructions)	Employer (See Instructions DSHS)		

	MONET	TARY POLITICAL CONTRIBUTION	ONS			SCHEDU	LE A1
	The Instru	action Guide explains how to complete this	form.			pages Schedule A1: 14/14 Rpt: 17/21	
2	FILER NAME Women In N					D (Ethics Commissi 0138	on Filers)
4	Date 06/30/2023	 Full name of contributor			7 Amou	int of Contribution (\$)	\$5.00
		North Bend, WA 98045					
8	Principal occu Counselor	upation / Job title (See Instructions)	9 Emplo DSHS	yer (See Instructions 3)		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/4 Rpt: 18/21	Women In November	00070138
4 Date	5 Payee name	
04/14/2023	Aceves Communications, LLC	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$15,000.00	PO Box 6514	
Expenditure from corporate funds	Houston, TX 77265	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Strategy, messaging
		3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	aht Office held
expenditure to benefit C/OI		grit Office Held
Data		
Date	Payee name	
06/30/2023	Act Blue	
Amount (\$)	Payee address; City; State; Zip Co	de
\$101.89	P.O. Box 441146	
Expenditure from		
corporate funds	Somerville, MA 02114	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Solicitation/Fundraising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		transaction fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
experientare to benefit 6/61	'	
Date	Payee name	
01/31/2023	Chase Bank	
Amount (\$)	Payee address; City; State; Zip Co	de
\$12.00	2900 Weslayen Ste 100	
Expenditure from corporate funds	Houston, TX 77027	
PURPOSE		(h) Description
OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Accounting/Banking	Check if Austin, TX, officeholder living expense
		Service charge
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/4 Rpt: 19/21	Women In November 00070138
4 Date	5 Payee name
02/28/2023	Chase Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$12.00	2900 Weslayen Ste 100
— Consenditure from	
Expenditure from corporate funds	Houston, TX 77027
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Service charge
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Data	
Date	Payee name
03/31/2023	Chase Bank
Amount (\$)	Payee address; City; State; Zip Code
\$12.00	2900 Weslayen Ste 100
Expenditure from corporate funds	Houston, TX 77027
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Service charge
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
04/30/2023	Chase Bank
Amount (\$)	Payee address; City; State; Zip Code
\$12.00	2900 Weslayen Ste 100
+== 100	
Expenditure from corporate funds	Houston, TX 77027
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Service charge
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/4 Rpt: 20/21	Women In November 00070138
4 Date	5 Payee name
05/31/2023	Chase Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$12.00	2900 Weslayen Ste 100
	, and the second se
Expenditure from corporate funds	Houston, TX 77027
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Service charge
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
01/08/2023	Dean Liscum Communications
Amount (\$)	Payee address; City; State; Zip Code
\$1,688.00	3116 Tuam
Ψ1,000.00	SIIS TUUM
Expenditure from	
corporate funds	Houston, TX 77004
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Emails
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff of of	'
Date	Payee name
04/03/2023	NationBuilder
Amount (\$)	Payee address; City; State; Zip Code
\$1,644.00	PO Box 811428
, _, · · · · · · · · · · · · · · · · · ·	
Expenditure from	Los Angeles CA 00091
corporate funds	Los Angeles, CA 90081
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Web Site host
	WED SILE HOSE
Occupation Children	On didn't 10 ff a balden name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
SAPORARIO TO BOTTON O/OI	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER Capter a cottogen and listed above)

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/4 Rpt: 21/21	Women In November 00070138
4 Date	5 Payee name
05/02/2023	Patino Strategies, LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$20,000.00	PO Box 925631
Expenditure from corporate funds	Houston, TX 77292
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	stategy, targeting
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/28/2023	Zoom Video Communications Inc
Amount (\$)	Payee address; City; State; Zip Code
\$646.53	55 Almaden Blvd. 6th floor
Expenditure from corporate funds	San Jose, CA 95113
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
	Video conferencing
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held