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) 00051024 3 COMMITTEE NAME **OFFICE USE ONLY** Capital Area Democratic Women PAC Date Received **ELECTRONICALLY FILED** 07/17/2023 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P. O. Box 12962 Date Hand-delivered or Date Postmarked Capitol Station Change of Address Austin, TX 78711-2962 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Allison G. NAME NICKNAME LAST **SUFFIX** Hienrich STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2301 Ohlen Rd. #107 STREET **ADDRESS** (Residence or Business) Austin, TX 78757 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2301 Ohlen Rd. #107 MAILING **ADDRESS** Austin, TX 78757 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 297-1650 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 General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Capital Area Democ	ratic Women PAC		00051024	
4 COMMITTEE	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2 Magauras	A. Supported		
	Measures (Describe by date and location of election and nature of issue.)	А. Зирритеи		
		B. Opposed		
	3. Officeholders			
	Assisted (Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,129.41
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	1,219.42
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAS G PERIOD	T DAY \$	8,650.67
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
6 AFFIDAVIT				
J ,		I swear, or affirm, under penalty of p true and correct and includes all info under Title 15, Election Code.		
			G. Hienrich	
		Signature of C	ampaign Treası	urer
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ped before me, by the said	,	this the _	day
		which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of offi	cer administering oath
Signature of officer	administering valit	i milea name of officer autilitistering oath	TIUC OF OH	oci auministenny vatri

SUBTOTALS - GPAC

FORM GPAC **COVER SHEET PG 3**

3 0f 14					
17 CO	MMITTE	E NAME	18 Filer ID	(Ethics Commissi	on Filers)
Cap	oital Ar	ea Democratic Women PAC	00051024		
19 SCHEDULE SUBTOTALS					
NAN	/IE OF S		SUBTOTAL	AMOUNT	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,129.41
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR 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		\$	
8.	8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			\$	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	1,219.42
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	\$	

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 1/5 Rpt: 4/14				
2	FILER NAME		3	Filer ID (Ethics Commission	r Filers)				
	Capital Area	Democratic Women PAC				00051024			
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Barrera, Carlos (The Honorable) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$45.00				
8	Principal occu	Austin, TX 78727 pation / Job title (See Instructions	s) [c	Employer (See Instructions					
0	Judge	pation / 300 title (See instructions	5)	Travis County)				
	Date Full name of contributor out-of-state PAC (ID#:) 02/24/2023 Blazey, Dayna (The Honorable) Contributor address; City; State; Zip Code		-	Amount of Contribution (\$)	\$21.37				
	Principal occu	Austin, TX 78704 pation / Job title (See Instructions	3)	Employer (See Instructions	;) 				
Judge			State of Texas	-,					
	Date Full name of contributor out-of-state PAC (ID#:) 02/24/2023 Blazey, Dayna (The Honorable) Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$26.63			
		Austin, TX 78704							
	Principal occu Judge	pation / Job title (See Instructions	5)	Employer (See Instructions State of Texas	5)				
	Date 02/24/2023	Full name of contributor Castillo Law Office Contributor address; City; S Austin, TX 78716	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00		
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)				
	Date 02/24/2023	Full name of contributor Castillo-Littlejohn, Susana Contributor address; City; S Austin, TX 78716)		Amount of Contribution (\$)	\$20.00		
	Principal occu Attorney	pation / Job title (See Instructions	5)	Employer (See Instructions Self-Employed	5)				
			•						

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A		
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 2/5 Rpt: 5/14		
2	FILER NAME Capital Area Democratic Women PAC			3	Filer ID (Ethics Commission 00051024	n Filers)		
4	Date 02/04/2023	Date 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$26.63		
_	Daine in a language	Austin, TX 78758	la la	Frankrije (Ozakastica				
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions N/A	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 02/24/2023 Del Rio, Alicia Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$45.00			
	Austin, TX 78749 Principal occupation / Job title (See Instructions) Employer (See Instructions)		 s)					
N/A N/A			,					
Date Full name of contributor out-of-state PAC (ID#:			•	Amount of Contribution (\$)	\$45.00			
		Austin, TX 78704						
	Principal occu N/A	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)			
	Date 02/24/2023	Gibbons, Heidi)		Amount of Contribution (\$)	\$25.00	
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions N/A	<u>I</u> 5)			
	Date Full name of contributor out-of-state PAC (ID#:) 02/24/2023 Gibbons, Heidi Contributor address; City; State; Zip Code Austin, TX 78703			Amount of Contribution (\$)	\$20.00			
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)			
			,					

2 FILER NAME Capital Area D 4 Date 06/12/2023	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A1:		
Capital Area E 4 Date 96/12/2023		The Instruction Guide explains how to complete this form.			
4 Date 5 06/12/2023	Democratic Women PAC		3 Filer ID (Ethics Commission 00051024	Filers)	
ľ			7 Amount of Contribution (\$)	\$26.63	
	Austin, TX 78757				
 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Texas House of Representations 					
Date Full name of contributor out-of-state PAC 02/24/2023 Limon-Mercado, Dyana (The Honorable) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$21.37	
Principal occup	Austin, TX 78745 ation / Job title (See Instructions)	Employer (See Instructions)			
County Clerk		Travis County			
Date 02/24/2023	Full name of contributor out-of-state PAC (ID#:_Limon-Mercado, Dyana (The Honorable) Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$47.68	
	Austin, TX 78745				
Principal occupa County Clerk	ation / Job title (See Instructions)	Employer (See Instructions) Travis County)		
Date 02/24/2023 	Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$26.63	
Principal occup	Austin, TX 78704 ation / Job title (See Instructions)	Employer (See Instructions)		
Not Employed		N/A			
Date 06/14/2023	Full name of contributor out-of-state PAC (ID#:_ Patrick, Mary Contributor address; City; State; Zip Code Austin, TX 78703		Amount of Contribution (\$)	\$52.95	
Principal occupa Retired	ation / Job title (See Instructions)	Employer (See Instructions) N/A)		

2 FILER NAME Capital Area D	tion Guide explains how to complete this fo	orm	1 Total pages Sched	
Capital Area D		The Instruction Guide explains how to complete this form.		
	FILER NAME Capital Area Democratic Women PAC		3 Filer ID (Ethics C 00051024	Commission Filers)
02/24/2023 6	Date 5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribu	ution (\$) \$47.68
	Austin, TX 78731			
8 Principal occupa Attorney	ation / Job title (See Instructions)	9 Employer (See Instructions Jason English Law)	
Date Full name of contributor out-of-state PAC (ID#:			Amount of Contribu	ution (\$) \$26.63
Principal occupa	Austin, TX 78723 Principal occupation / Job title (See Instructions) Employer (See Instru			
District Clerk Travis County		Travis County		
Date 03/04/2023	Full name of contributor out-of-state PAC (ID#:_ Shelton, Susan Contributor address; City; State; Zip Code)	Amount of Contrib	ution (\$) \$26.63
	Austin, TX 78715			
Principal occupa Information De	ation / Job title (See Instructions) eveloper	Employer (See Instructions IBM)	
Date Full name of contributor out-of-state PAC 04/04/2023 Vega Rubio, Andromeda Contributor address; City; State; Zip Code Austin, TX 78732			Amount of Contribu	ution (\$) \$316.11
	ation / Job title (See Instructions)	Employer (See Instructions)	
Criminal Defense Attorney		A. Vega Rubio Law		
Date 02/14/2023 	Full name of contributor out-of-state PAC (ID#:_ Wooten, Kennon Contributor address; City; State; Zip Code Austin, TX 78704		Amount of Contribu	ution (\$) \$210.84
Principal occupa Lawyer	ation / Job title (See Instructions)	Employer (See Instructions Scott Douglass & McCo		

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/14
2	FILER NAME Capital Area Democratic Women PAC	3 Filer ID (Ethics Commission Filers) 00051024
4	Date 02/20/2023 5 Full name of contributor out-of-state PAC (ID#:) Yelverton, Brittany 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$26
8	Austin, TX 78748 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	ons)
Ĭ	Non-profit Director Girls Empowerment N	

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

Polling Expense Travel in Distriction
Printing Expense Travel Out of I
Salaries/Wages/Contract Labor OTHER (enter

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: 1/6 Rpt: 9/14	Capital Area Democratic Women PAC		00051024	
4 Date	5 Payee name			
04/06/2023	Austin AFL-CIO Council			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$215.00	P.O. Box 301074			
Expenditure from corporate funds	Austin, TX 78703			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF	Advertising Expense		avel outside of Texas. Complete Schedule T.	
EXPENDITURE	The state of the s		ustin, TX, officeholder living expense	
		Program a	ad	
9 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			
01/03/2023	Constant Contact			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$47.97	1601 Trapelo Rd			
- Cynonditure from				
Expenditure from corporate funds	Waltham, MA 02451			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Advertising Expense	ш	avel outside of Texas. Complete Schedule T.	
EXI ENDITORE			ustin, TX, officeholder living expense	
		Email serv	rice	
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held	
expenditure to benefit C/O		ym	Office field	
Dete				
Date	Payee name			
02/03/2023	Constant Contact			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$47.97	1601 Trapelo Rd			
Expenditure from				
corporate funds	Waltham, MA 02451			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Advertising Expense		avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense	
		Email ser		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held	
expenditure to benefit C/O		-		

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal Services

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

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: 2/6 Rpt: 10/14	Capital Area Democratic Women PAC 00051024
4 Date	5 Payee name
03/28/2023	Constant Contact
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$47.97	1601 Trapelo Rd
- Evpanditura from	
Expenditure from corporate funds	Waltham, MA 02451
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Email service
	Littali Service
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	Davis same
Date	Payee name
04/05/2023	Constant Contact
Amount (\$)	Payee address; City; State; Zip Code
\$47.97	1601 Trapelo Rd
Expenditure from	
corporate funds	Waltham, MA 02451
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
	Check if Austin, TX, officeholder living expense Email service
	Email Service
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
<u> </u>	
Date	Payee name
05/05/2023	Constant Contact
Amount (\$)	Payee address; City; State; Zip Code
\$47.97	1601 Trapelo Rd
Expenditure from	
corporate funds	Waltham, MA 02451
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 Email service
	Ettiali Service
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Il 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: 3/6 Rpt: 11/14	Capital Area Democratic Women PAC 00051024
4 Date	5 Payee name
06/05/2023	Constant Contact
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$47.97	1601 Trapelo Rd
Expenditure from	
corporate funds	Waltham, MA 02451
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Email service
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	the state of the s
Date	Payee name
02/28/2023	DonateWay
Amount (\$)	Payee address; City; State; Zip Code
\$29.58	P.O. Box 301267
Ψ23.50	1.0. Box 301207
Expenditure from corporate funds	Austin, TX 78703
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.
	Credit card processing fees
	Credit data processing rees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
03/31/2023	DonateWay
Amount (\$)	Payee address; City; State; Zip Code
\$1.63	P.O. Box 301267
Expenditure from corporate funds	Austin, TX 78703
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.
LAI ENDITORE	Credit cord processing foce
	Credit card processing fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
vertising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Leaal Services Salaries/Waacs/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment	Al 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: 4/6 Rpt: 12/14	Capital Area Democratic Women PAC 00051024	
4 Date	5 Payee name	
04/30/2023	DonateWay	
6 Amount (\$)	7 Payee address; City; State; Zip Code	_
\$16.11	P.O. Box 301267	
Expenditure from corporate funds	Austin, TX 78703	
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.	
	Credit cord processing foce	
	Credit card processing fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experiulture to beriefft C/O		
Date	Payee name	_
06/30/2023	DonateWay	
Amount (\$)	Payee address; City; State; Zip Code	_
\$6.21	P.O. Box 301267	
Ψ0.21	1.0. 80% 301207	
Expenditure from corporate funds	Austin, TX 78703	
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	
	Credit card processing fees	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O	H	
Date	Payee name	_
02/08/2023	El Mercado - South	
Amount (\$)	Payee address; City; State; Zip Code	
\$108.25	1302 S. 1st St	
Expenditure from		
corporate funds	Austin, TX 78704	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Event Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Deposit for meeting space	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		
		_

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

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: 5/6 Rpt: 13/14	Capital Area Democratic Women PAC 00051024
4 Date	5 Payee name
02/24/2023	El Mercado - South
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$292.80	1302 S. 1st St
- Evpanditura from	
Expenditure from corporate funds	Austin, TX 78704
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Club Lunch Meeting
	Club Eurion Weeting
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Davies same
	Payee name
01/01/2023	Google LLC
Amount (\$)	Payee address; City; State; Zip Code
\$12.79	1600 Amphitheatre Pkwy
Expenditure from	
corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
-	Check if Austin, TX, officeholder living expense GSuite
	GSuite
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
D-1-	
Date	Payee name
02/01/2023	Google LLC
Amount (\$)	Payee address; City; State; Zip Code
\$12.79	1600 Amphitheatre Pkwy
Expenditure from	
corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense GSuite
	Gaulle
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
dvertising Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/6 Rpt: 14/14	Capital Area Democratic Women PAC 00051024
4 Date	5 Payee name
06/12/2023	Google LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$27.29	1600 Amphitheatre Pkwy
- Evpanditura from	
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	GSuite
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date	Payee name
06/14/2023	Google LLC
Amount (\$)	Payee address; City; State; Zip Code
\$27.29	1600 Amphitheatre Pkwy
Expenditure from	
corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
LXI LIBITORE	Check if Austin, TX, officeholder living expense
	GSuite
2 1 2 2 1 1 2 1 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/10/2023	Square Space
Amount (\$)	Payee address; City; State; Zip Code
\$181.86	8 Clarkson St
Expenditure from corporate funds	New York, NY 10014
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Web hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
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