

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME West Pearland Republican Women	13 Filer ID (Ethics Commission Filers) 00066458
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,480.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,051.02
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 36,302.83
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Teresa Bitner

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC

17 COMMITTEE NAME West Pearland Republican Women		18 Filer ID 00066458	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	2,480.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$	
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$	
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	7,051.02
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/7 Rpt: 4/24
2 FILER NAME West Pearland Republican Women		3 Filer ID (Ethics Commission Filers) 00066458
4 Date 02/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bitner, Teresa <hr/> 6 Contributor address; City; State; Zip Code Alvin, TX 77511	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) independent contractor
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonilla, Donna <hr/> Contributor address; City; State; Zip Code Manvel, TX 77578	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Jeff (Mr.) <hr/> Contributor address; City; State; Zip Code Pearland, TX 77581	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) drainage commissioner		Employer (See Instructions) self employed
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cade, Layni <hr/> Contributor address; City; State; Zip Code Pearland, TX 77581	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Connections Academy
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cade, Layni <hr/> Contributor address; City; State; Zip Code Pearland, TX 77581	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Connections Academy

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/7 Rpt: 5/24
2 FILER NAME West Pearland Republican Women		3 Filer ID (Ethics Commission Filers) 00066458
4 Date 02/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Roy (Judge)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Pearland, TX 77581	
8 Principal occupation / Job title (See Instructions) Justice of the Peace		9 Employer (See Instructions) Brazoria County
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Virginia (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Pearland, TX 77581	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Lisa	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Pearland, TX 77581	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daugherty, Karen	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Pearland, TX 77584	
Principal occupation / Job title (See Instructions) Retired RN		Employer (See Instructions)
Date 03/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hehn, Lorraine	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Manvel, TX 77548	
Principal occupation / Job title (See Instructions) Community Svc		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/7 Rpt: 6/24
2 FILER NAME West Pearland Republican Women		3 Filer ID (Ethics Commission Filers) 00066458
4 Date 01/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hehn, Lorraine <hr/> 6 Contributor address; City; State; Zip Code Manvel, TX 77548	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Community Svc		9 Employer (See Instructions)
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heil, Clair <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huynh, Jeslyn <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Professional Researcher		Employer (See Instructions)
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koons, Elaine <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) CM
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Libby , Johnson <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/7 Rpt: 7/24
2 FILER NAME West Pearland Republican Women		3 Filer ID (Ethics Commission Filers) 00066458
4 Date 02/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McReaken, Douglas (Mr.)	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code Pearland, TX 77581	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Self
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, Mayes	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Company president		Employer (See Instructions) Middleton Oil Company
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Sarah	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Pearland, TX 77581	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Shannan	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Pearland, TX 77584	
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions) Counseling Connections for Change
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Shannan	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Pearland, TX 77584	
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions) Counseling Connections for Change

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/7 Rpt: 8/24
2 FILER NAME West Pearland Republican Women		3 Filer ID (Ethics Commission Filers) 00066458
4 Date 02/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Sherry	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Pearland, TX 77581	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Connie	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Houston, TX 77058	
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions)
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Margaret	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Pearland, TX 77584	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Ana	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Pearland, TX 77584	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sebesta, Matt (Judge)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Angleton, TX 77515	
Principal occupation / Job title (See Instructions) County Judge		Employer (See Instructions) Brazoria County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/7 Rpt: 9/24
2 FILER NAME West Pearland Republican Women		3 Filer ID (Ethics Commission Filers) 00066458
4 Date 03/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stallman, Bo <hr/> 6 Contributor address; City; State; Zip Code Angleton, TX 77515	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Sheriff		9 Employer (See Instructions) Brazoria County
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, C.B. <hr/> Contributor address; City; State; Zip Code Pearland, TX 77581	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Constable		Employer (See Instructions) Brazoria County
Date 04/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, C.B. <hr/> Contributor address; City; State; Zip Code Pearland, TX 77581	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Constable		Employer (See Instructions) Brazoria County
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORNBORROW, MOPSIE <hr/> Contributor address; City; State; Zip Code Manvel, TX 77578	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanner, Stephanie <hr/> Contributor address; City; State; Zip Code Pearland, TX 77581	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Dist Director		Employer (See Instructions) Middleton

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/24
2 FILER NAME West Pearland Republican Women		3 Filer ID (Ethics Commission Filers) 00066458
4 Date 02/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wind, Karen <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77584	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zylks, Samantha <hr/> Contributor address; City; State; Zip Code Manvel, TX 77578	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zylks, Samantha <hr/> Contributor address; City; State; Zip Code Manvel, TX 77578	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/14 Rpt: 11/24	2 FILER NAME West Pearland Republican Women	3 Filer ID (Ethics Commission Filers) 00066458
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4 Date 06/05/2023	5 Payee name 4Imprint
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6 Amount (\$) \$501.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 101 Commerce St Oshkosh, WI 54901
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Coffee mugs for promotional giveaways
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/03/2023	Payee name A's Garden Center/Ace Hdwr
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Amount (\$) \$83.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 1700 2027 North Main,77581 Pearland, TX 77588
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gift Basket Giveaway
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/01/2023	Payee name Adult Education Center
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Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2246 N. Washington Ave. Pearland, TX 77581
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation for Fundraiser Adult Education Center
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/14 Rpt: 12/24	2 FILER NAME West Pearland Republican Women	3 Filer ID (Ethics Commission Filers) 00066458
4 Date 02/28/2023	5 Payee name Alvin Manvel Chamber of Commerce	
6 Amount (\$) \$400.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 105 W. Willis St Alvin, TX 77511	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership dues
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/17/2023	Payee name Alvin Manvel Chamber of Commerce	
Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 105 W. Willis St Alvin, TX 77511	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Expo
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/05/2023	Payee name Amazon, Amazon	
Amount (\$) \$172.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code On line Pearland, TX 77581	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Retirement gift for Senator Larry Taylor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/14 Rpt: 13/24	2 FILER NAME West Pearland Republican Women	3 Filer ID (Ethics Commission Filers) 00066458
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4 Date 02/07/2023	5 Payee name BRAZORIA COUNTY REPUBLICAN PARTY
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6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 135 Spanish Oak Circle Lake Jackson, TX 77566
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership renewal
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/24/2023	Payee name Greater Houston Council of Federated Republican Women
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Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4851 W Fork Blvd. Conroe, TX 77304
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership dues
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/10/2023	Payee name Hilton Garden Inn
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12101 Shadow Creek Pkwy Pearland, TX 77584
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Proudly Red Fundraiser rental of Venue
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/14 Rpt: 14/24	2 FILER NAME West Pearland Republican Women	3 Filer ID (Ethics Commission Filers) 00066458
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4 Date 03/29/2023	5 Payee name HomeGoods
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6 Amount (\$) \$37.26 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2650 Pearland Pkwy, #10 Pearland, TX 77581
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gift Basket items
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/01/2023	Payee name Hurd, Karrie
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Amount (\$) \$43.18 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1419 Blakely Grove Ln Pearland, TX 77581
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Door prize for monthly mtg
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/16/2023	Payee name Kroger
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Amount (\$) \$26.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3245 FM 518 Pearland, TX 77581
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Greater Houston Council snacks for meeting
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/14 Rpt: 15/24	2 FILER NAME West Pearland Republican Women	3 Filer ID (Ethics Commission Filers) 00066458
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4 Date 04/06/2023	5 Payee name Magnolia Cajun Comfort
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6 Amount (\$) \$158.66 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1807 Broadway St Pearland, TX 77581
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Appetizers/Beverages for Mixer
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/29/2023	Payee name Magnolia Cajun
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Amount (\$) \$25.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1807 Broadway Pearland, TX 77581
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gift Basket for giveaway
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/04/2023	Payee name Name Badges
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Amount (\$) \$113.27 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12240 SW 53rd St #511 Cooper City , FL 33330
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name badges for membership
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/14 Rpt: 16/24	2 FILER NAME West Pearland Republican Women	3 Filer ID (Ethics Commission Filers) 00066458
4 Date 01/05/2023	5 Payee name National Pen Co	
6 Amount (\$) \$460.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO box 847203 Dallas, TX 75284-7203	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pens with WPRW information
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/06/2023	Payee name Office Depot	
Amount (\$) \$14.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2032 N Main Pearland, TX 77581	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing for mixer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/18/2023	Payee name Pearland Chamber of Commerce	
Amount (\$) \$350.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6117 Broadway St. Pearland, TX 77581	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pearland Chamber of commerce annual banquet
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/14 Rpt: 17/24	2 FILER NAME West Pearland Republican Women	3 Filer ID (Ethics Commission Filers) 00066458
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4 Date 02/13/2023	5 Payee name Pearland Chamber of Commerce
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6 Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6117 Broadway St. Pearland, TX 77581
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense First Friday Networking mixer
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/03/2023	Payee name Pearland Chamber of Commerce
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Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6117 Broadway St. Pearland, TX 77581
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense First Friday table
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/20/2023	Payee name Pearland Chamber of Commerce
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Amount (\$) \$287.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6117 Broadway St. Pearland, TX 77581
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Chamber fees and scholarship
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/14 Rpt: 18/24	2 FILER NAME West Pearland Republican Women	3 Filer ID (Ethics Commission Filers) 00066458
4 Date 02/08/2023	5 Payee name Pearland Postal Plus	
6 Amount (\$) \$176.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8325 Broadway St. Suite 202 Pearland, TX 77581	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Mailbox yearly rent	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent for committee mailbox
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/16/2023	Payee name Sam's Club	
Amount (\$) \$52.16 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 155 W. El Dorado Blvd Friendswood, TX 77546	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Greater Houston Council meeting snacks
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/03/2023	Payee name Seven Seeds TX BBQ	
Amount (\$) \$160.56 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3040 County Rd 48 Rosharon, TX 77583	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for membership drive mixer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/14 Rpt: 19/24	2 FILER NAME West Pearland Republican Women	3 Filer ID (Ethics Commission Filers) 00066458
4 Date 03/13/2023	5 Payee name Shadow Creek High School	
6 Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11850 Broadway Pearland, TX 77584	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Shadow Creek High School Shark Day event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/05/2023	Payee name Stitched with Luv	
Amount (\$) \$158.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1419 Blakely Grove Lane Pearland, TX 77581	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gift Basket for Brazoria GOP
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/16/2023	Payee name Stitched with Luv	
Amount (\$) \$205.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1419 Blakely Grove Lane Pearland, TX 77581	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Basket BC Lincoln Reagan dinner and First Friday Giveaway
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/14 Rpt: 20/24	2 FILER NAME West Pearland Republican Women	3 Filer ID (Ethics Commission Filers) 00066458
4 Date 01/24/2023	5 Payee name Texas Federation of Republican Women	
6 Amount (\$) \$700.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual dues for additional members
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/17/2023	Payee name Texas Federation of Republican Women	
Amount (\$) \$200.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership submission to TFRW
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/14/2023	Payee name Texas Federation of Republican Women	
Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Scholarship for Tx Federation of Republican Women
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/14 Rpt: 21/24	2 FILER NAME West Pearland Republican Women	3 Filer ID (Ethics Commission Filers) 00066458
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4 Date 03/03/2023	5 Payee name Texas Federation of Republican Women
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6 Amount (\$) \$75.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Submission
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/20/2023	Payee name Texas Federation of Republican Women
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Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Submission
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/01/2023	Payee name The Enchanted Cottage
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Amount (\$) \$32.48 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 312 W Sealy Alvin, TX 77511
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Door prize for meeting
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/14 Rpt: 22/24	2 FILER NAME West Pearland Republican Women	3 Filer ID (Ethics Commission Filers) 00066458
4 Date 02/03/2023	5 Payee name Total Wine and More	
6 Amount (\$) \$112.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 10322 Broadway Pearland, TX 77584	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Christmas party beverages
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/03/2023	Payee name Vallenson's Brewing Company	
Amount (\$) \$93.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4081 Rice Drier Road Pearland, TX 77581	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Beverages for Membership mixer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/07/2023	Payee name Webflow, Inc.	
Amount (\$) \$21.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 398 11th Street 2nd floor San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website assistance	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website manager used
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/14 Rpt: 23/24	2 FILER NAME West Pearland Republican Women	3 Filer ID (Ethics Commission Filers) 00066458
4 Date 02/06/2023	5 Payee name Webflow, Inc.	
6 Amount (\$) \$21.32 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 398 11th Street 2nd floor San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website Manager used	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website management system
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/06/2023	Payee name Webflow, Inc.	
Amount (\$) \$21.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 398 11th Street 2nd floor San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website Management System	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Manager used
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/07/2023	Payee name Webflow, Inc.	
Amount (\$) \$21.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 398 11th Street 2nd floor San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website Management System	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Manager used
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/14 Rpt: 24/24	2 FILER NAME West Pearland Republican Women	3 Filer ID (Ethics Commission Filers) 00066458
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4 Date 05/07/2023	5 Payee name Webflow, Inc.
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6 Amount (\$) \$21.32 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 398 11th Street 2nd floor San Francisco, CA 94103
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website Management System	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Manager used
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/30/2023	Payee name Wheelchairs for Warriors
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Amount (\$) \$75.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2031 Anders Lane Kemah, TX 77565
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Wheel Chairs for Warriors
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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