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) 00085529 3 COMMITTEE NAME **OFFICE USE ONLY** TriCounty Republican Women's Club Date Received **ELECTRONICALLY FILED** 07/17/2023 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 2404 S Grand Blvd. Ste. 120 Date Hand-delivered or Date Postmarked Change of Address Pearland, TX 77581 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Andrea P. NAME NICKNAME LAST **SUFFIX** Williams STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2404 S Grand Blvd. Ste. 120 STREET **ADDRESS** (Residence or Business) Pearland, TX 77581 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2404 Grand Blvd. Ste. 120 MAILING **ADDRESS** Pearland, TX 77581 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 997-2033 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)
TriCounty Republicar	n Women's Club		00085529	,
4 COMMITTEE	1. Candidates	A. Supported	1	
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	3,443.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	3,926.77
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAS G PERIOD	T DAY \$	9,660.88
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
6 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of p true and correct and includes all info under Title 15, Election Code.		
			D. Melli	
			ea P. Williams ampaign Treasu	ıror
AFFIX NOTA	RY STAMP / SEAL ABOVE	Signature of C	ampaign rreaso	ii ei
			this the	day
OT	, 20, to certify \	vhich, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of office	cer administering oath
Signature of Officer	ad./iiiiotofilig oddf	a name of officer duffinistering oddi	THE OF OHIO	os. administering oddi

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

				3 of 40
		EE NAME Republican Women's Club	18 Filer ID 00085529	(Ethics Commission Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 3,443.00
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 CORPORAL LABOR ORGANIZATION	TION OR	\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 3,926.77
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/26 Rpt: 4/40	
2	FILER NAME TriCounty Re	epublican Women's Club		3	Filer ID (Ethics Commission 00085529	n Filers)
4	Date 01/06/2023	 5 Full name of contributor out-of-state PAC (ID#:_ Batson, Elizabeth (Ms.) 6 Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$17.00
_	Daine in all account	Pearland, TX 77581	2 Farely (Carly Instruction			
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 02/07/2023	Full name of contributor out-of-state PAC (ID#:_ Biedenfeld, Dietrich (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00
	Deinsinal assu	West Columbia, TX 77486	Familia var (Can Instructions			
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 05/03/2023	Full name of contributor out-of-state PAC (ID#:_ Bodkins, Patti (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
		Pasadena, TX 77505				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/03/2023	Full name of contributor out-of-state PAC (ID#:_ Bradley, Jonda (Ms.) Contributor address; City; State; Zip Code Houston, TX 77062			Amount of Contribution (\$)	\$30.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/03/2023	Full name of contributor out-of-state PAC (ID#:_Bradley, Jonda (Ms.) Contributor address; City; State; Zip Code Houston, TX 77062			Amount of Contribution (\$)	\$17.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 2/26 Rpt: 5/40	
2	FILER NAME TriCounty Re	epublican Women's Club		3	Filer ID (Ethics Commission 00085529	n Filers)
4	Date 01/27/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$17.00
_		Houston, TX 77062				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/27/2023	Full name of contributor out-of-state PAC (ID#: Bradley, Jonda (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
	Principal occu	Houston, TX 77062 pation / Job title (See Instructions)	Employer (See Instructions	<u>.</u>		
	Retired	salion, oob tale (ooe mediadaens)	Employer (God moraduloris	,		
	Date 01/05/2023	Full name of contributor out-of-state PAC (ID#: Brannan, Elizabeth (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$45.00
		Houston, TX 77062				
		pation / Job title (See Instructions) / Interior Design	Employer (See Instructions	i)		
	Date 02/23/2023	Full name of contributor out-of-state PAC (ID#:_Brannan, Elizabeth (Ms.) Contributor address; City; State; Zip Code Houston, TX 77062			Amount of Contribution (\$)	\$100.00
	•	pation / Job title (See Instructions) Interior Design	Employer (See Instructions)		
	Date 01/06/2023	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$45.00
	Principal occu Insurance Aç	pation / Job title (See Instructions) gent	Employer (See Instructions)		
		I				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/26 Rpt: 6/40	
2	FILER NAME TriCounty Ro	epublican Women's Club		3	Filer ID (Ethics Commission 00085529	n Filers)
4	Date 02/27/2023	5 Full name of contributor out-of-state PAC (ID#:_ Burleigh, Denise (Ms.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00
_	Discipal	Pearland, TX 77581				
8	Insurance A	pation / Job title (See Instructions) gent	9 Employer (See Instructions)		
	Date 04/06/2023	Full name of contributor			Amount of Contribution (\$)	\$40.00
	Principal occu	Pearland, TX 77581 pation / Job title (See Instructions)	Employer (See Instructions)		
	Insurance B		, ,,			
	Date 05/03/2023	Full name of contributor out-of-state PAC (ID#:_ Burleigh, Denise (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$40.00
		Pearland, TX 77581				
	Principal occu Insurance B	pation / Job title (See Instructions) roker	Employer (See Instructions)		
	Date 02/14/2023	Full name of contributor out-of-state PAC (ID#:_Cade, Layni (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$17.00
	Principal occu	Pearland, TX 77581 pation / Job title (See Instructions)	Employer (See Instructions)		
	Teacher					
	Date 02/14/2023	Full name of contributor out-of-state PAC (ID#:_ Cade, Layni (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77581			Amount of Contribution (\$)	\$30.00
	Principal occu Teacher	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	■ A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/26 Rpt: 7/40	
2	FILER NAME TriCounty Re	epublican Women's Club		3	Filer ID (Ethics Commission 00085529	Filers)
4	Date 03/15/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$30.00
_		Pearland, TX 77581				
8	Principal occu Teacher	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 01/01/2023	Full name of contributor out-of-state PAC (ID#:_ Casper, Sara (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00
	Dringing age	Deer Park, TX 77536	Employer (Coo Instructions	_		
	Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/04/2023	Full name of contributor out-of-state PAC (ID#:_ Casper, Sara (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$17.00
		Deer Park, TX 77536				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/10/2023	Full name of contributor out-of-state PAC (ID#:_ Casper, Sara (Ms.) Contributor address; City; State; Zip Code Deer Park, TX 77536			Amount of Contribution (\$)	\$12.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 03/15/2023	Full name of contributor out-of-state PAC (ID#:_ Casper, Sara (Ms.) Contributor address; City; State; Zip Code Deer Park, TX 77536)		Amount of Contribution (\$)	\$12.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/26 Rpt: 8/40	
2	FILER NAME TriCounty Re	epublican Women's Club		3	Filer ID (Ethics Commission 00085529	n Filers)
4	Date 04/06/2023	5 Full name of contributor out-of-state PAC (ID#:_ Chaney, Deborah (Ms.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$20.00
_		Friendswood, TX 77546				
8	Principal occu Retired	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 01/05/2023	Full name of contributor out-of-state PAC (ID#:_Chapman, Gayle (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$17.00
	Deinsinal assu	Pearland, TX 77584	Fandayar (Caa Instructions			
	Retired	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/10/2023	Full name of contributor out-of-state PAC (ID#:_ Chapman, Gayle (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00
		Pearland, TX 77584				
	Principal occu Retired	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/05/2023	Full name of contributor out-of-state PAC (ID#:_ Cohen, Mindy (Ms.) Contributor address; City; State; Zip Code Houston, TX 77062			Amount of Contribution (\$)	\$32.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/10/2023	Full name of contributor out-of-state PAC (ID#:_Cohen, Mindy (Ms.) Contributor address; City; State; Zip Code Houston, TX 77062			Amount of Contribution (\$)	\$12.00
	Principal occu Retired	ipation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDULE	A1
	The Instruc	ction Guide explains how to	complete this forr	n.	1	Total pages Schedule A1: Sch: 6/26 Rpt: 9/40	
2	FILER NAME TriCounty Re	epublican Women's Club			3	Filer ID (Ethics Commission 00085529	Filers)
4	Date 01/10/2023	Cohen, Mindy (Ms.)	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$30.00
_		Houston, TX 77062	1-				
8	Principal occur Retired	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 01/01/2023	Full name of contributor David, Carolyn (Ms.) Contributor address; City; State;				Amount of Contribution (\$)	\$30.00
	Principal occur	Pearland, TX 77584 pation / Job title (See Instructions)		Employer (See Instructions			
	Retired	oddon 7 oob tide (oee maldedons)		Employer (See manuchons	,		
	Date 01/01/2023	Full name of contributor David, Carri (Ms.) Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$17.00
		Pearland, TX 77584					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 01/26/2023	Full name of contributor David, Carri (Ms.) Contributor address; City; State; Pearland, TX 77584				Amount of Contribution (\$)	\$17.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 02/04/2023	David, Carri (Ms.)				Amount of Contribution (\$)	\$17.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions)		
			'				

	MONET	ARY POLITICAL CONTRIBI	UTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete	this forr	n.	1	Total pages Schedule A1: Sch: 7/26 Rpt: 10/40	
2	FILER NAME TriCounty Re	epublican Women's Club			3	Filer ID (Ethics Commission 00085529	n Filers)
4	Date 03/28/2023	 Full name of contributor out-of-state PADavid, Carri (Ms.) Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$20.00
_		Pearland, TX 77584					
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 03/09/2023	Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00
	Principal occu	Pearland, TX 77581 pation / Job title (See Instructions)		Employer (See Instructions)		
	Business Ow	ner					
	Date 03/27/2023	Full name of contributor out-of-state PA DeVine, Gaylyn (Ms.) Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$20.00
		Pearland, TX 77581					
	Principal occu Business Ow	oation / Job title (See Instructions) vner		Employer (See Instructions)		
	Date 01/03/2023	Full name of contributor out-of-state PA Eckels, Donna (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77581				Amount of Contribution (\$)	\$30.00
	Principal occu Marketing Co	pation / Job title (See Instructions) pordinator		Employer (See Instructions)		
	Date 01/03/2023	Full name of contributor out-of-state PA Eckels, Donna (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77581	AC (ID#:			Amount of Contribution (\$)	\$17.00
	Principal occu Marketing Co	pation / Job title (See Instructions) pordinator		Employer (See Instructions)		
			I				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	■ A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/26 Rpt: 11/40	
2	FILER NAME TriCounty Ro	epublican Women's Club		3	Filer ID (Ethics Commission 00085529	Filers)
4	Date 02/10/2023	 Full name of contributor out-of-state PAC (ID#:_ Eckels, Donna (Ms.) Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$17.00
_		Pearland, TX 77581				
8	Marketing C	pation / Job title (See Instructions) oordinator	9 Employer (See Instructions))		
	Date 04/06/2023	Full name of contributor out-of-state PAC (ID#:_ Eckels, Donna (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
	Dringing Local	Pearland, TX 77581	Employer (Con Instructions			
	Marketing	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 05/03/2023	Full name of contributor out-of-state PAC (ID#:_ Eckels, Donna (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$35.00
		Pearland, TX 77584				
	Principal occu Marketing	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/21/2023	Full name of contributor out-of-state PAC (ID#:_Elbert, Jane (Ms.) Contributor address; City; State; Zip Code League City, TX 77573			Amount of Contribution (\$)	\$17.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/04/2023	Full name of contributor out-of-state PAC (ID#:_ Eubanks, Patricia (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$30.00
	Principal occu Homemaker	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONEI	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 9/26 Rpt: 12/40	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	TriCounty Re	epublican Women's Club			00085529	
4	Date 01/04/2023	 Full name of contributor uut-of-state PAC (ID# Eubanks, Patricia (Ms.) Contributor address; City; State; Zip Code 	<u>:)</u>	7	Amount of Contribution (\$)	\$17.00
•	Principal occu	Friendswood, TX 77546 pation / Job title (See Instructions)	Employor (Soo Instructions	<u>,,</u>		
0	Homemaker	pation / Job title (See instructions)	9 Employer (See Instructions)		
	Date 03/30/2023	Full name of contributor out-of-state PAC (ID# Eubanks, Patricia (Ms.) Contributor address; City; State; Zip Code	<u> </u> :)		Amount of Contribution (\$)	\$20.00
		Friendswood, TX 77546				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 05/04/2023	Full name of contributor out-of-state PAC (ID# Eubanks, Patricia (Ms.) Contributor address; City; State; Zip Code	÷)		Amount of Contribution (\$)	\$20.00
		Friendswood, TX 77546				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 01/04/2023	Full name of contributor out-of-state PAC (ID#Flannery, Kelley (Ms.) Contributor address; City; State; Zip Code Seabrook, TX 77586	<u>; </u>		Amount of Contribution (\$)	\$49.00
	•	pation / Job title (See Instructions) SN Child Care	Employer (See Instructions	5)		
	Date 01/27/2023	Full name of contributor out-of-state PAC (ID#Flickinger, Fred (Mr.) Contributor address; City; State; Zip Code Kingwood, TX 77345	:		Amount of Contribution (\$)	\$17.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/26 Rpt: 13/40	
2	FILER NAME TriCounty Re	epublican Women's Club		3	Filer ID (Ethics Commission 00085529	ı Filers)
4	Date 01/05/2023	 Full name of contributor out-of-state PAC (ID#:_ Fort, Linda (Ms.) Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$17.00
_	Deinsinal	Pearland, TX 77584	O Frankrije (Ozakata stiera			
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 01/10/2023	Full name of contributor out-of-state PAC (ID#:_Fort, Linda (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00
	Dringing occu	Pearland, TX 77584	Employer (See Instructions			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/04/2023	Full name of contributor out-of-state PAC (ID#:_ Grayson, Rachel (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$17.00
		Pearland, TX 77581				
	Principal occu Team Leade	pation / Job title (See Instructions) er	Employer (See Instructions)		
	Date 01/06/2023	Full name of contributor out-of-state PAC (ID#:_ Gresham, Regina (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77582			Amount of Contribution (\$)	\$30.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/06/2023	Full name of contributor out-of-state PAC (ID#:_ Gresham, Regina (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77582)		Amount of Contribution (\$)	\$17.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete th	his form.	1	Total pages Schedule A1: Sch: 11/26 Rpt: 14/40	
2	FILER NAME TriCounty Re	publican Women's Club		3	Filer ID (Ethics Commission 00085529	n Filers)
4	Date 01/24/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$17.00
_	Delicalization	Pearland, TX 77582	In Familia (Octobrilla)	<u> </u>		
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 04/05/2023	Full name of contributor out-of-state PAC (Gresham, Regina (Ms.) Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$20.00
		Pearland, TX 77582	1	L		
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/13/2023	Full name of contributor out-of-state PAC (Gresham, Regina (Ms.) Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$25.00
		Pearland, TX 77581				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 01/01/2023	Full name of contributor out-of-state PAC (Groff, Carol (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77584	(ID#:)		Amount of Contribution (\$)	\$17.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> S)		
	Date 01/01/2023	Full name of contributor out-of-state PAC (Groff, Carol (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77584	(ID#:)		Amount of Contribution (\$)	\$30.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	■ A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/26 Rpt: 15/40	
2	FILER NAME TriCounty Re	epublican Women's Club		3	Filer ID (Ethics Commission 00085529	Filers)
4	Date 03/27/2023	 Full name of contributor out-of-state PAC (ID#:_Groff, Carol (Ms.) Contributor address; City; State; Zip Code 	_	7	Amount of Contribution (\$)	\$20.00
_	Delicalization	Pearland, TX 77581	D. Faralana (On Jantana)	$\overline{\Gamma}$		
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 05/04/2023	Full name of contributor out-of-state PAC (ID#:_ Groff, Carol (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
	Delicalization	Pearland, TX 77581	Fourtheast (October Northwest)	$\overline{\Gamma}$		
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/01/2023	Full name of contributor out-of-state PAC (ID#:_ Groff, Carol (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$17.00
		Pearland, TX 77581				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2023	Full name of contributor out-of-state PAC (ID#:_Haley, Carol (Ms.) Contributor address; City; State; Zip Code Houston, TX 77089)		Amount of Contribution (\$)	\$30.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/15/2023	Full name of contributor out-of-state PAC (ID#:_Harrison, Judith (Ms.) Contributor address; City; State; Zip Code Houston, TX 77089-5310)		Amount of Contribution (\$)	\$30.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 13/26 Rpt: 16/40	
2	FILER NAME TriCounty Re	publican Women's Club		3	Filer ID (Ethics Commission 00085529	Filers)
4	Date 03/15/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$12.00
_	Delicational	League City, TX 77574	- Faralassa (October National			
8	Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/07/2023	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$34.00
	Principal occu	Taylor Lake Village, TX 77586 Dation / Job title (See Instructions)	Employer (See Instructions)		
	Recruiter					
	Date 04/11/2023	Full name of contributor			Amount of Contribution (\$)	\$20.00
		Taylor Lake Village, TX 77586				
	Principal occu Recruiter	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/04/2023	Full name of contributor out-of-state PAC (ID#: Jamison, Heather (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77584			Amount of Contribution (\$)	\$30.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/15/2023	Full name of contributor out-of-state PAC (ID#: Landis, Judy Contributor address; City; State; Zip Code Pearland, TX 77581			Amount of Contribution (\$)	\$30.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
		-				

	MONET	ARY POLITICAL CONTRIBUTION	S	SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this form	m.	1 Total pages Schedule A1: Sch: 14/26 Rpt: 17/40	
2	FILER NAME TriCounty Re	epublican Women's Club	3	3 Filer ID (Ethics Commission 00085529	n Filers)
4	Date 01/05/2023	 5 Full name of contributor out-of-state PAC (ID#:		7 Amount of Contribution (\$)	\$30.00
		Friendswood, TX 77546			
8	Principal occu Realtor	pation / Job title (See Instructions) 9	Employer (See Instructions))	
	Date 02/08/2023	Full name of contributor out-of-state PAC (ID#: Lowe, Janis (Ms.) Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$17.00
	Deire in all a con-	Friendswood, TX 77546	Frankrig (Gradination)		
	Realtor	pation / Job title (See Instructions)	Employer (See Instructions))	
	Date 02/27/2023	Full name of contributor out-of-state PAC (ID#: Lowe, Janis (Ms.) Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$20.00
		Friendswood, TX 77546			
	Principal occu Realtor	pation / Job title (See Instructions)	Employer (See Instructions))	
	Date 03/27/2023	Full name of contributor out-of-state PAC (ID#: Lowe, Janis (Ms.) Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$20.00
	Dringinal occu	Friendswood, TX 77546 pation / Job title (See Instructions)	Employer (See Instructions)		
	Realtor	pation / Job title (See instructions)	Employer (See instructions))	
	Date 06/19/2023	Full name of contributor out-of-state PAC (ID#: Lowe, Janis (Ms.) Contributor address; City; State; Zip Code Friendswood, TX 77546		Amount of Contribution (\$)	\$25.00
	Principal occu Realtor	pation / Job title (See Instructions)	Employer (See Instructions))	
		<u>'</u>			

	MONET	ARY POLITICAL CONTRIB	SUTION	NS		SCHEDULI	E A1
	The Instruc	tion Guide explains how to complete	e this for	m.	1	Total pages Schedule A1: Sch: 15/26 Rpt: 18/40	
2	FILER NAME TriCounty Re	publican Women's Club			3	Filer ID (Ethics Commission 00085529	ı Filers)
4	Date 01/22/2023	 Full name of contributor			7	Amount of Contribution (\$)	\$17.00
8	Principal occur	Houston, TX 77090 pation / Job title (See Instructions)	9	Employer (See Instructions) 		
Ü	District Direc			Employer (See manuchons	')		
	Date 01/27/2023	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$30.00
	Principal occu	Houston, TX 77090 Dation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	District Direc	cor					
	Date 03/27/2023	Full name of contributor out-of-state P McDonald, Dawn (Ms.) Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$20.00
		Houston, TX 77089					
	Principal occu District Direc	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/28/2023	Full name of contributor out-of-state P McNeil, Sandi (Ms.) Contributor address; City; State; Zip Code League CIty, TX 77573				Amount of Contribution (\$)	\$25.00
	Principal occu Realtor	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 05/21/2023	Full name of contributor out-of-state P Medway, Carol (Ms.) Contributor address; City; State; Zip Code League City, TX 77573	PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Retired	oation / Job title (See Instructions)		Employer (See Instructions	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	■ A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/26 Rpt: 19/40	
2	FILER NAME TriCounty Re	epublican Women's Club		3	Filer ID (Ethics Commission 00085529	Filers)
4	Date 04/23/2023	Full name of contributor		7	Amount of Contribution (\$)	\$20.00
_		League City, TX 77573				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 01/06/2023	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$32.00
	Principal occu Business Ag	Seabrook, TX 77586 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/06/2023	Full name of contributor out-of-state PAC (ID#: Molohosky, Stephen (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00
	Principal occu	Seabrook, TX 77586 spation / Job title (See Instructions)	Employer (See Instructions)		
_	Date 02/10/2023	Full name of contributor out-of-state PAC (ID#: Molohosky, Stephen (Mr.)			Amount of Contribution (\$)	\$17.00
	Principal occu Business Ag	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/01/2023	Full name of contributor out-of-state PAC (ID#:_ Mondragon, Lydia (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77584			Amount of Contribution (\$)	\$30.00
	Principal occu Travel Agent	pation / Job title (See Instructions) t	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	■ A1
	The Instruc	tion Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/26 Rpt: 20/40	
2	FILER NAME TriCounty Re	publican Women's Club		3	Filer ID (Ethics Commission 00085529	ı Filers)
4	01/04/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$17.00
8	Principal occur	Pearland, TX 77584 pation / Job title (See Instructions)	9 Employer (See Instructions	·/		
0	Travel Agent	iduoi / 300 title (See Instructions)	5 Employer (See instructions)		
	Date 01/31/2023	Full name of contributor out-of-state PAC (ID#:_Mondragon, Lydia (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$17.00
	Delegation of a con-	Pearland, TX 77584	Fundament (On a landoustic se	<u></u>		
	Travel Agent	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/24/2023	Full name of contributor out-of-state PAC (ID#:_Mondragon, Lydia (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
		Pearland, TX 77584				
	Principal occup Travel Agent	action / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/27/2023	Full name of contributor out-of-state PAC (ID#:_Mondragon, Lydia (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77584			Amount of Contribution (\$)	\$20.00
	Principal occup Travel Agent	nation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> 5)		
	Date 03/15/2023	Full name of contributor out-of-state PAC (ID#:_Mondragon, Lydia (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77584			Amount of Contribution (\$)	\$12.00
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	■ A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/26 Rpt: 21/40	
2	FILER NAME TriCounty Re	epublican Women's Club		3	Filer ID (Ethics Commission 00085529	Filers)
4	Date 01/09/2023	 Full name of contributor out-of-state PAC (ID#:_ Moore, Ken (Mr.) Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$30.00
		Pearland, TX 77581				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 02/09/2023	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$17.00
	Principal occu	Pearland, TX 77581 pation / Job title (See Instructions)	Employer (See Instructions)		
	Retired					
	Date 01/10/2023	Full name of contributor out-of-state PAC (ID#:_ North, Linda (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$23.00
		Pasadena, TX 77505				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/10/2023	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$17.00
	Principal occu	Pasadena, TX 77505 pation / Job title (See Instructions)	Employer (See Instructions)		
	Retired					
	Date 02/08/2023	Full name of contributor out-of-state PAC (ID#:_ Pfeiffer, Thomas (Mr.) Contributor address; City; State; Zip Code Pearland, TX 77581)		Amount of Contribution (\$)	\$45.00
	Principal occu Judge	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 19/26 Rpt: 22/40	
2	FILER NAME TriCounty Re	epublican Women's Club		3	Filer ID (Ethics Commission 00085529	ı Filers)
4	Date 06/28/2023	Full name of contributor)	7	Amount of Contribution (\$)	\$75.00
_	<u> </u>	Pearland, TX 77581				
8	Judge	ipation / Job title (See Instructions)	9 Employer (See Instructions			
	Date 01/02/2023	Full name of contributor out-of-state PAC (ID#:_ Ramirez, Larissa (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00
	Principal occu	League City, TX 77573 spation / Job title (See Instructions)	Employer (See Instructions	(;		
		n Project Mgr/Estimator		,		
	Date 03/15/2023	Full name of contributor out-of-state PAC (ID#:_ Rasco, Lisa (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$30.00
		Pearland, TX 77581				
	Principal occu Prog Coor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/30/2023	Full name of contributor out-of-state PAC (ID#:_ Redus, Rachel (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77581			Amount of Contribution (\$)	\$20.00
	Principal occu Team Leade	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 05/09/2023	Full name of contributor out-of-state PAC (ID#:_ Redus, Rachel (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77581			Amount of Contribution (\$)	\$20.00
	Principal occu Team Mana	ipation / Job title (See Instructions) ger	Employer (See Instructions	()		

TriCounty Republican Women's Club	N	JONET	ARY POLITICAL CO	NTRIBUTIO	NS		SCHEDULE	■ A1
TriCounty Republican Women's Club	Т	he Instru	ction Guide explains how to	complete this fo	orm.	1		
Date Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired						3		ı Filers)
Rogers, Kathy (Ms.) 8 Principal occupation / Job title (See Instructions) Retired Principal			·	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		_		
Friendswood, TX 77546			Rogers, Kathy (Ms.))	'	Amount of Contribution (\$)	\$30.00
Principal occupation / Job title (See Instructions) Retired Date				, zip Code				
Petiriced Date Full name of contributor out-of-state PAC (ID#:								
Contributor address; City; State; Zip Code			pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired Date O3/27/2023 Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired Date O4/06/2023 Pill name of contributor O4/06/2023 Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired Date O4/06/2023 Full name of contributor Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired Date Principal occupation / Job title (See Instructions) Retired Date O5/04/2023 Full name of contributor O5/04/2023 Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$2 Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions)	D	ate	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired Date 03/27/2023 Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Retired Date 04/06/2023 Full name of contributor Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired Date 04/06/2023 Full name of contributor	0:	1/26/2023	Rogers, Kathy (Ms.)					\$32.00
Principal occupation / Job title (See Instructions) Retired Date			Contributor address; City; State;					
Principal occupation / Job title (See Instructions) Retired Date								
Principal occupation / Job title (See Instructions) Retired Date								
Retired Date Sull name of contributor out-of-state PAC (ID#:			l ·	<u>, </u>				
O3/27/2023 Rogers, Kathy (Ms.) \$2 Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired Date O4/06/2023 Rogers, Kathy (Ms.) Employer (See Instructions) Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired Date O5/04/2023 Full name of contributor out-of-state PAC (ID#:			pation / Job title (See Instructions)		Employer (See Instructions	5)		
Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired Date 04/06/2023 Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired Date 05/04/2023 Full name of contributor Out-of-state PAC (ID#:	D	ate	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
Principal occupation / Job title (See Instructions) Retired Date O4/06/2023 Principal occupation / Job title (See Instructions) Retired Date O4/06/2023 Priendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired Date Principal occupation / Job title (See Instructions) Retired Date O5/04/2023 Principal occupation / Job title (See Instructions) Retired Date O5/04/2023 Principal occupation / Gontributor out-of-state PAC (ID#: O5/04/2023 Rogers, Kathy (Ms.) Principal occupation / Gontributor out-of-state PAC (ID#: O5/04/2023 Rogers, Kathy (Ms.) Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions)	03	3/27/2023	Rogers, Kathy (Ms.)					\$20.00
Principal occupation / Job title (See Instructions) Retired Date 04/06/2023 Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Amount of Contribution (\$) \$2 Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$2 Amount of Contribution (\$) \$2 Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) \$2 Principal occupation / Job title (See Instructions) Employer (See Instructions)			Contributor address; City; State;	; Zip Code				
Principal occupation / Job title (See Instructions) Retired Date 04/06/2023 Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Amount of Contribution (\$) \$2 Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$2 Amount of Contribution (\$) \$2 Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) \$2 Principal occupation / Job title (See Instructions) Employer (See Instructions)								
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)			Friendswood, TX 77546					
Date O4/06/2023 Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired Date O5/04/2023 Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code Date O5/04/2023 Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$2	Pı	rincipal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
O4/06/2023 Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired Date O5/04/2023 Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$2 Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions)	R	etired						
Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired Date 05/04/2023 Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$2	D	ate	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Retired Date 05/04/2023 Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$2 Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions)	04	4/06/2023	Rogers, Kathy (Ms.)					\$20.00
Principal occupation / Job title (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:			Contributor address; City; State;					
Principal occupation / Job title (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:								
Principal occupation / Job title (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:			Friendswood TX 77546					
Date Full name of contributor out-of-state PAC (ID#:	Pı	rincipal occu			Employer (See Instructions	<u>.</u>		
05/04/2023 Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions)		•	patient, too tile (eee metadione)		Employer (God mondone)	,		
05/04/2023 Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Di	ate	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
Contributor address; City; State; Zip Code Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions)			_				(,,	\$20.00
Friendswood, TX 77546 Principal occupation / Job title (See Instructions) Employer (See Instructions)				: Zip Code				
Principal occupation / Job title (See Instructions) Employer (See Instructions)			, , , ,	, ,				
Principal occupation / Job title (See Instructions) Employer (See Instructions)								
			Friendswood, TX 77546					
	Pı	rincipal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
Retired	R	etired						
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	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 21/26 Rpt: 24/40	
2	FILER NAME TriCounty Re	epublican Women's Club		3	Filer ID (Ethics Commission 00085529	Filers)
4	Date 06/29/2023	 Full name of contributor out-of-state PAC (ID#:_Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$25.00
_		Friendswood, TX 77546				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/15/2023	Full name of contributor out-of-state PAC (ID#: Rogers, Kathy (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$12.00
	Principal occu	Friendswood, TX 77546 pation / Job title (See Instructions)	Employer (See Instructions	<u></u>		
	Retired	salon, oss tale (coo mendeasile)		,		
	Date 02/26/2023	Full name of contributor out-of-state PAC (ID#: Rosser, Stephanie (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
		Alvin, TX 77581				
	Principal occu Nurse Practi	poation / Job title (See Instructions) oner	Employer (See Instructions	()		
	Date 01/06/2023	Full name of contributor out-of-state PAC (ID#:_Rosser, Stephanie (Ms.) Contributor address; City; State; Zip Code Alvin, TX 77511			Amount of Contribution (\$)	\$30.00
	Principal occu Nurse Practi	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 01/06/2023	Full name of contributor out-of-state PAC (ID#:_Rosser, Stephanie (Ms.) Contributor address; City; State; Zip Code Alvin, TX 77511			Amount of Contribution (\$)	\$17.00
	Principal occu Nurse Practi	pation / Job title (See Instructions)	Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 22/26 Rpt: 25/40	
2	FILER NAME TriCounty Re	epublican Women's Club		3	Filer ID (Ethics Commission 00085529	ı Filers)
4	Date 03/15/2023	 Full name of contributor)	7	Amount of Contribution (\$)	\$30.00
		Pearland, TX 77581				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 03/29/2023	Full name of contributor out-of-state PAC (ID#:_ Sheridan, Jonette (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
	Principal occu	Pearland, TX 77581 pation / Job title (See Instructions)	Employer (See Instructions	:)		
	Retired	, ,	, , ,	,		
	Date 05/04/2023	Full name of contributor out-of-state PAC (ID#:_ Sheridan, Jonette (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
		Pearland, TX 77581				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 01/26/2023	Full name of contributor out-of-state PAC (ID#:_Shumate, Sandra (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77581			Amount of Contribution (\$)	\$30.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 01/04/2023	Full name of contributor out-of-state PAC (ID#:_ Stearns, Winnie (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77581)		Amount of Contribution (\$)	\$17.00
	Principal occu Entrepreneu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 23/26 Rpt: 26/40	
2	FILER NAME TriCounty Re	epublican Women's Club		3	Filer ID (Ethics Commission 00085529	Filers)
4			7	Amount of Contribution (\$)	\$30.00	
_	<u></u>	Pearland, TX 77581				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/25/2023 Stearns, Winnie (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00	
	Principal occu	Pearland, TX 77581 pation / Job title (See Instructions)	Employer (See Instructions			
	Entrepreneu		Employer (See matructions			
	Date Full name of contributor out-of-state PAC (ID#:) O4/05/2023 Stearns, Winnie (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00	
		Pearland, TX 77581				
	Principal occu Entrepreneu	pation / Job title (See Instructions) r	Employer (See Instructions)		
	Date 02/01/2023	Full name of contributor out-of-state PAC (ID#:_ Stepp, Joe (Mr.) Contributor address; City; State; Zip Code Pasadena, TX 77505			Amount of Contribution (\$)	\$34.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/06/2023	Full name of contributor out-of-state PAC (ID#:_ Stevens, Buck (Mr.) Contributor address; City; State; Zip Code Pearland, TX 77581			Amount of Contribution (\$)	\$20.00
	Principal occu Constable	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 24/26 Rpt: 27/40		
2	FILER NAME TriCounty Re	epublican Women's Club		3	Filer ID (Ethics Commissio 00085529	n Filers)	
4	Date 01/01/2023			7	Amount of Contribution (\$)	\$30.00	
_		Houston, TX 77089	T				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)			
	Date Full name of contributor out-of-state PAC (ID#:) 02/23/2023 Strouhal, Ann (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00		
	Pearland, TX 77584 Principal occupation / Job title (See Instructions) Employer (See Instructions)			<u> </u> s)			
	HR Consulta	nt					
	Date Full name of contributor out-of-state PAC (ID#:) O2/28/2023 Strouhal, Ann (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
		Pearland, TX 77584					
	Principal occu HR Consulta	pation / Job title (See Instructions) nt	Employer (See Instructions	s)			
	Date Full name of contributor out-of-state PAC (ID#:) 03/27/2023 Strouhal, Ann (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77584			Amount of Contribution (\$)	\$20.00		
Principal occupation / Job title (See Instructions) HR Consultant Employer (See Instructions)			s)				
	Date Full name of contributor out-of-state PAC (ID#:) 05/05/2023 Strouhal, Ann (Ms.) Contributor address; City; State; Zip Code Pearland, TX 77584			Amount of Contribution (\$)	\$20.00		
	Principal occu HR Consulta	oation / Job title (See Instructions) nt	Employer (See Instructions	s)			
			<u>'</u>				

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 25/26 Rpt: 28/40	
2	FILER NAME TriCounty Republican Women's Club			3	Filer ID (Ethics Commission 00085529	n Filers)
4			7	Amount of Contribution (\$)	\$30.00	
	Dringing aggr	Pearland, TX 77584	Employer (See Instructions	<u>e)</u>		
8	HR Consulta	pation / Job title (See Instructions) nt	9 Employer (See Instructions	S)		
	Date Full name of contributor out-of-state PAC (ID#:) 01/02/2023 Sullivan, Colleen (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$17.00	
		Pearland, TX 77581				
Principal occupation / Job title (See Instructions) Employer (See Instructions Retired				s)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/27/2023 Sullivan, Colleen (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00	
		Pearland, TX 77581				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/14/2023 Velasco, Paolo (Mr.) Contributor address; City; State; Zip Code Pasadena, TX 77504			Amount of Contribution (\$)	\$17.00	
Principal occupation / Job title (See Instructions) Social Media Engagement CBN Employer (See Instructions)				s)		
	Date Full name of contributor out-of-state PAC (ID#:) 05/09/2023 Velasco, Paolo (Mr.) Contributor address; City; State; Zip Code Pasadena, TX 77504			Amount of Contribution (\$)	\$20.00	
		oation / Job title (See Instructions) Engagement CBN	Employer (See Instructions	s)		
			1			

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1 Total pages S Sch: 26/26 F		
2	FILER NAME TriCounty Re	epublican Women's Club		3 Filer ID (Eth 00085529	ics Commission	Filers)
4	Date 02/07/2023			7 Amount of Co	ntribution (\$)	\$34.00
8	Principal occu	Pearland, TX 77581 pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Entrepreneu		. , , , , , , , , , , , , , , , , , , ,	-,		
	Date Full name of contributor out-of-state PAC (ID#:) 04/05/2023 Wilson-DeVine, Gaylyn (Ms.) Contributor address; City; State; Zip Code		Amount of Co	ntribution (\$)	\$20.00	
	Principal occu	Pearland, TX 77581 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	BusinessOw	ner				
	Date Full name of contributor out-of-state PAC (ID#:) 02/14/2023 unknown, member Contributor address; City; State; Zip Code		Amount of Co	ntribution (\$)	\$49.00	
		Pearland, TX 77588				
	Principal occu unknown	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Date Full name of contributor out-of-state PAC (ID#:			Amount of Co	ntribution (\$)	\$20.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> s)		
	unknown					

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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: 1/11 Rpt: 30/40	TriCounty Republican Women's Club		00085529	
4 Date	5 Payee name		L	
01/11/2023	Christian Engaged			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$250.00	PO Box 472655			
Expenditure from corporate funds	Garland, TX 75047			
·		a >		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	l outside of Texas. Complete Sche	dula T
EXPENDITURE	Event Expense		n, TX, officeholder living expense	uule 1.
		For Speaking	g	
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held	
expenditure to benefit C/O	1			
Date	Payee name			
02/01/2023	Devine Promotions			
Amount (\$)	Payee address; City; State; Zip Co	do		
\$105.54	5411 Brookglen Suite B	ue		
\$105.54	3411 Blookgiell Suite B			
Expenditure from				
corporate funds	Houston, TX 77017			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Printing Expense		I outside of Texas. Complete Sche n, TX, officeholder living expense	dule T.
			es, forms, postcards	
		riao Datage	oo, ronne, pootoarae	
Complete ONLY if direct	Candidate/Officeholder name Office sou		Office held	
expenditure to benefit C/O		5		
Date	Davisa nama			
01/26/2023	Payee name Devine Promotions			
		-1-		
Amount (\$)	Payee address; City; State; Zip Co	ae		
\$75.12	5411 Brookglen Suite B			
Expenditure from				
corporate funds	Houston, TX 77017			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Office Overhead/Rental Expense		l outside of Texas. Complete Sche	dule T.
		Post Cards a	n, TX, officeholder living expense	
		1 001 04143 1	and postage	
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held	
expenditure to benefit C/OH				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
4 Tatal manua Cabadala E4.					
1 Total pages Schedule F1: Sch: 2/11 Rpt: 31/40	2 FILER NAME TriCounty Republican Women's Club 3 Filer ID (Ethics Commission Filers) 00085529				
4 Date	5 Payee name				
02/13/2023	Devine Promotions				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$73.61	5411 Brookglen Suite B				
Expenditure from corporate funds	Houston, TX 77017				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF	Printing Expense				
EXPENDITURE	Check if Austin, TX, officeholder living expense				
	Silent Auction Forms Program Printing Payer Forms				
	Table Tents				
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
03/16/2023	Devine Promotions				
Amount (\$)	Payee address; City; State; Zip Code				
\$50.86					
φ50.60	5411 Brookglen Suite B				
Expenditure from corporate funds	Houston, TX 77017				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Website Check if travel outside of Texas. Complete Schedule T.				
LXI ENDITORE	Check if Austin, TX, officeholder living expense				
	Website domain renewal				
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
04/17/2023	Devine Promotions				
Amount (\$)					
\$48.00	5411 Brookglen Suite B				
Expenditure from corporate funds	Houston, TX 77017				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.				
LAI LADITURE	Check if Austin, TX, officeholder living expense				
	Name Badge for Sara Casper Jo Himel Kathey				
	Rodgers Lydia Mondragon				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OH					

SCHEDULE F1

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

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing 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: 3/11 Rpt: 32/40	TriCounty Republican Women's Club 00085529				
4 Date	5 Payee name				
01/10/2023	Donham & Williams				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$695.00	2404 S Gran Blvd Suite 120				
Expenditure from					
corporate funds	Pearland, TX 77581				
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	Filing Campaign Finance report for 07/01/22 to				
	12/31/22				
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
·					
Date	Payee name				
01/30/2023	Frost Bank				
Amount (\$)	Payee address; City; State; Zip Code				
\$5.00	5208 Broadway St				
Expenditure from corporate funds	Pearland, TX 77581				
PURPOSE	(a) a				
OF	Category (See Categories listed at the top of this schedule) Fees CD Description Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Check if Austin, TX, officeholder living expense				
	Service Fee				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
experientare to benefit 6/01					
Date	Payee name				
02/28/2023	Frost Bank				
Amount (\$)	Payee address; City; State; Zip Code				
\$5.00	5208 Broadway St				
Expenditure from					
corporate funds	Pearland, TX 77581				
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 Service Fee				
	Scivice Fee				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OH				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 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 complete this form.				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_			
Sch: 4/11 Rpt: 33/40	TriCounty Republican Women's Club 00085529				
4 Date	5 Payee name				
03/31/2023	Frost Bank				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$5.00	5208 Broadway St				
Expenditure from					
corporate funds	Pearland, TX 77581				
8 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				
	Service Fee				
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/O	-				
Date	Payee name	_			
04/30/2023	Frost Bank				
Amount (\$)	Payee address; City; State; Zip Code	_			
\$5.00	5208 Broadway St				
— Companditure from					
Expenditure from corporate funds	Pearland, TX 77581				
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				
	Service Fee				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_			
expenditure to benefit C/O	4				
Date	Payee name	_			
05/31/2023	Frost Bank				
Amount (\$)	Payee address; City; State; Zip Code				
\$5.00	5208 Broadway St				
Expenditure from					
corporate funds	Pearland, TX 77581				
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				
	Service Fee				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_			
expenditure to benefit C/OH					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
4 Tatal manua Cabadula E4.						
1 Total pages Schedule F1: Sch: 5/11 Rpt: 34/40	2 FILER NAME TriCounty Republican Women's Club 3 Filer ID (Ethics Commission Filers) 00085529					
4 Date	5 Payee name					
06/30/2023	Frost Bank					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$5.00	5208 Broadway St					
40.00						
Expenditure from corporate funds	Pearland, TX 77581					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EVENDITUE	Fees Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE	Check if Austin, TX, officeholder living expense					
	Service Fee					
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
01/10/2023	Golfcrest Country Club					
Amount (\$)	Payee address; City; State; Zip Code					
\$300.00	2509 Country Club Dr					
Expenditure from corporate funds	Pearland, TX 77581					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.					
EXPENDITORE	Check if Austin, TX, officeholder living expense					
	Monthly Meeting					
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
02/14/2023	Golfcrest Country Club					
02/14/2020						
Amount (\$)	Payee address; City; State; Zip Code					
\$292.00	2509 Country Club Dr					
Expenditure from corporate funds	Pearland, TX 77581					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EVEN DITUE	Event Expense Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE	Check if Austin, TX, officeholder living expense					
	Monthly Meeting					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OH					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By 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: 6/11 Rpt: 35/40	TriCounty Republican Women's Club 00085529			
4 Date	5 Payee name			
03/14/2023	Golfcrest Country Club			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$100.00	2509 Country Club Dr			
Expenditure from	Doorland TV 77E01			
corporate funds	Pearland, TX 77581			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.			
	Check if Austin, TX, officeholder living expense Monthly Meeting			
	Monthly Weeting			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
experialitate to belieff 6/01	'			
Date	Payee name			
04/11/2023	Golfcrest Country Club			
Amount (\$)	Payee address; City; State; Zip Code			
\$420.00	2509 Country Club Dr			
,				
Expenditure from	D I I. TV 77504			
corporate funds	Pearland, TX 77581			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.			
	Check if Austin, TX, officeholder living expense			
	Monthly Meeting			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
experialitate to beliefit 6/01	'			
Date	Payee name			
05/09/2023	Golfcrest Country Club			
Amount (\$)	Payee address; City; State; Zip Code			
\$300.00	2509 Country Club Dr			
Expenditure from	Pearland, TX 77581			
corporate funds	1			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	Monthly Meeting			
	Montany Meeting			
Complete ONLY if allow	Condidate/Officeholder name			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
- p				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 7/11 Rpt: 36/40	TriCounty Republican Women's Club 00085529				
4 Date	5 Payee name				
05/17/2023	One Source Web Development LLC				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$300.00	38201 Liberty St				
Expenditure from					
corporate funds	Lebanon, OR 97355				
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 Website Updates				
	Website Opuates				
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·				
Date	Davies same				
	Payee name				
06/20/2023	One Source Web Development LLC				
Amount (\$)	Payee address; City; State; Zip Code				
\$159.00	38201 Liberty St				
Expenditure from					
corporate funds	Lebanon, OR 97355				
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				
	Plug in Renewal				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OI					
<u> </u>					
Date	Payee name				
04/27/2023	Square Inc				
Amount (\$)	Payee address; City; State; Zip Code				
\$2.85	1455 Market St Ste 600				
Expenditure from					
corporate funds	San Francisco, CO 94103				
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.				
	Cradit Cord Food				
	Credit Card Fees				
Complete CALL V if direct	Candidate/Officeholder name Office sought Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	expenditure to benefit C/OH				

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 com	plete this form.			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 8/11 Rpt: 37/40	TriCounty Republican Women's Club	00085529			
4 Date	5 Payee name				
05/24/2023	Square Inc				
6 Amount (\$)	7 Payee address; City; State; Zip Cod	е			
\$21.32	1455 Market St Ste 600				
Expenditure from corporate funds	San Francisco, CO 94103				
8 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 Credit Card Fees			
		Credit Card i ces			
• O I O O O O O O O O O O O O O O O O O		000			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht Office held			
Date	Payee name				
06/14/2023	Square Inc				
Amount (\$)	Payee address; City; State; Zip Cod	е			
\$21.32	1455 Market St Ste 600				
Expenditure from corporate funds	San Francisco, CO 94103				
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.			
		Creatit Cond Food			
		Credit Card Fees			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	nt Office held			
experience to belief of or	·				
Date	Payee name				
01/30/2023	Square Inc				
Amount (\$)	Payee address; City; State; Zip Cod	e			
\$53.44	1455 Market St Ste 600				
Expenditure from corporate funds	San Francisco, CO 94103				
•	(2) 6	N o de la			
PURPOSE OF	2 (b) Description Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense			
		Credit Card Fees			
Complete ONLY if direct	Candidate/Officeholder name Office soug	nt Office held			
	expenditure to benefit C/OH				

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

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: 9/11 Rpt: 38/40	TriCounty Republican Women's Club 00085529		
4 Date	5 Payee name		
02/28/2023	Square Inc		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$26.36	1455 Market St Ste 600		
- Cynanditura fram			
Expenditure from corporate funds	San Francisco, CO 94103		
8 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		
	Credit Card Fees		
	Great Gara Fees		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_	
expenditure to benefit C/O	Н		
Date	Payee name	=	
03/31/2023	Square Inc		
Amount (\$)	Payee address; City; State; Zip Code	_	
\$16.96	1455 Market St Ste 600		
Expenditure from corporate funds	San Francisco, CO 94103		
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.		
	Credit Cord Food		
	Credit Card Fees		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			
Data		_	
Date 04/30/2023	Payee name		
	Square Inc	_	
Amount (\$)	Payee address; City; State; Zip Code		
\$10.85	1455 Market St Ste 600		
Expenditure from			
corporate funds	San Francisco, CO 94103		
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		
	Credit Card Fees		
	Great Gara rees		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_	
expenditure to benefit C/OH			
		_	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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	al Committee Legal Services Salaries/Wages/Committee The Instruction Guide explains how to complete to	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 10/11 Rpt: 39/40	TriCounty Republican Women's Club	00085529
4 Date	5 Payee name	
05/30/2023	Square Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$45.85	1455 Market St Ste 600	
Expenditure from corporate funds	San Francisco, CO 94103	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	escription
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		redit Card Fees
		cuit cuid i ccs
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		Sinde noid
Dete	T _	
Date	Payee name	
06/30/2023	Square Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$6.60	1455 Market St Ste 600	
- Cynanditura fram		
Expenditure from corporate funds	San Francisco, CO 94103	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	escription
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
	Cr	redit Card Fees
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	п	
Date	Payee name	
01/20/2023	Texas Comptroller	
Amount (\$)	Payee address; City; State; Zip Code	
\$307.18	PO Box 13528 Capitol Station	
Ψ001120	To Box 10020 Supher Station	
Expenditure from	Auctin TV 70711	
corporate funds	Austin, TX 78711	
PURPOSE OF		escription
EXPENDITURE	SALES TAX	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		ales Tax
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	•	55550

SCHEDULE F1

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

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

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 (outpers extrapply not listed above)

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wa	ages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to con	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 11/11 Rpt: 40/40	TriCounty Republican Women's Club	00085529
4 Date	5 Payee name	
02/10/2023	Texas State Directory	
6 Amount (\$)	7 Payee address; City; State; Zip Coc	10
\$116.91	1800 Nueces St	
Expenditure from		
corporate funds	Austin, TX 78701	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Office Overfielda/Neffici Expense	Check if Austin, TX, officeholder living expense
		Legislative Handbook
9 Complete ONLY if direct	Candidate/Officeholder name Office souc	tht Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		onice neid
Date	Payee name	
03/23/2023	US Postal Office	
Amount (\$)	Payee address; City; State; Zip Coo	te
\$98.00	3519 E Walnut St	
φ90.00	3319 E Wallut St	
Expenditure from		
corporate funds	Pearland, TX 77581	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Post Office Box Payment
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/O	<u> </u>	