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) 00054608 3 COMMITTEE NAME **OFFICE USE ONLY** Conner Harrington Republican Women Date Received **ELECTRONICALLY FILED** 01/11/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P. O. Box 865104 Date Hand-delivered or Date Postmarked Change of Address Plano, TX 75086 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Jenny L. NAME NICKNAME LAST **SUFFIX** McCall STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 5949 Burgandy Street STREET **ADDRESS** (Residence or Business) Plano, TX 75093 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** MAILING **ADDRESS** Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 244-2652 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2023 12/31/2023 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)
Conner Harrington F	Republican Women		00054608	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	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 M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	5,346.50
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	6,338.43
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	31,065.73
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
6 AFFIDAVIT	<u> </u>		<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Ma Jane	v.l. MaCall	
		Signature of Ca	y L. McCall mpaign Treasure	er
AFFIX NOTA	DV STAMD / SEAL ABOVE	g 07 0	, 9	
AFFIX NOTA	RY STAMP / SEAL ABOVE			
		, th	his the	day
of	, 20, to certify \	which, witness my hand and seal of office.		
Signature of officer	r administering oath	Printed name of officer administering oath	Title of office	r administering oath

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			3 of 27	•
17 COMMIT	EE NAME Harrington Republican Women	18 Filer ID 00054608	(Ethics Commission Filers)	
	LE SUBTOTALS			
NAME OF	SCHEDULE		SUBTOTAL AMOUNT	
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 5,346	.50
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	!	\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$	
9.	SCHEDULE E: LOANS		\$	
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 6,338	.43
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBU	TIONS			SCHEDULI	■ A1
	The Instruc	etion Guide explains how to complete th	his form.		1	Total pages Schedule A1: Sch: 1/12 Rpt: 4/27	
2	FILER NAME Conner Harri	ngton Republican Women			3	Filer ID (Ethics Commission 00054608	ı Filers)
4	Date 12/29/2023	 Full name of contributor)	7	Amount of Contribution (\$)	\$25.00
		Plano, TX 75023					
8	Principal occur retired	pation / Job title (See Instructions)	9 Er	nployer (See Instructions	5)		
	Date 11/30/2023	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$23.64
	Principal occu	Frisco, TX 75035 pation / Job title (See Instructions)	Er	nployer (See Instructions	<u> </u> ;)		
	Law Enforce	ment Deputy					
	Date 09/06/2023	Full name of contributor	(ID#:)		Amount of Contribution (\$)	\$38.11
		Plano, TX 75075					
	Principal occu Retired	oation / Job title (See Instructions)	Er	nployer (See Instructions	5)		
	Date 09/14/2023	Full name of contributor out-of-state PAC Backous, Cheryl Contributor address; City; State; Zip Code Plano, TX 75075				Amount of Contribution (\$)	\$60.00
	Principal occu	pation / Job title (See Instructions)	Er	nployer (See Instructions	<u> </u> 5)		
	Date 12/29/2023	Full name of contributor out-of-state PAC Backous, Cheryl Contributor address; City; State; Zip Code Plano, TX 75075)		Amount of Contribution (\$)	\$16.00
	Principal occu Retired	pation / Job title (See Instructions)	Er	nployer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIB	BUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete	e this for	m.	1	Total pages Schedule A1: Sch: 2/12 Rpt: 5/27	
2	FILER NAME Conner Harr	ngton Republican Women			3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 07/28/2023	 Full name of contributor	-		7	Amount of Contribution (\$)	\$38.45
		Plano, TX 75023					
8	Principal occu retired	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 12/29/2023	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	Plano, TX 75023 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 08/09/2023	Full name of contributor out-of-state F Chappell, Peggy Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$80.00
		Plano, TX 75074			_		
	Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 08/09/2023	Full name of contributor out-of-state F Cole, Phyllis Contributor address; City; State; Zip Code Plano, TX 75023)		Amount of Contribution (\$)	\$40.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 08/03/2023	Full name of contributor out-of-state F Coolik, Russ Contributor address; City; State; Zip Code Plano, TX 75074)		Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			•				

	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: 3/12 Rpt: 6/27	
2	FILER NAME Conner Harri	ngton Republican Women		3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 08/09/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$40.00
		Richardson, TX 75080-2300				
8	Principal occu Nutritional Co	·	9 Employer (See Instructions)		
	Date 12/29/2023	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$165.00
	Principal occu Homemaker	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/03/2023	Full name of contributor out-of-state PAC (ID#: Donley, Diane Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$40.00
	Dringing aggr	Plano, TX 75075	Employer (See Instructions			
	Business De	pation / Job title (See Instructions) velopment	Employer (See instructions)		
	Date 12/29/2023	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Business De	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/01/2023	Full name of contributor out-of-state PAC (ID#: Dorrance, Cheryl Contributor address; City; State; Zip Code Plano, TX 75074)		Amount of Contribution (\$)	\$76.72
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 4/12 Rpt: 7/27	
2	FILER NAME Conner Harri	ngton Republican Women		3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 11/13/2023	 Full name of contributor out-of-state PAC (ID# Dorrance, Cheryl Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00
_		Plano, TX 75074	T			
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 08/09/2023	Full name of contributor out-of-state PAC (ID# Faber, Christine Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$40.00
	Principal occur	Plano, TX 75023 pation / Job title (See Instructions)	Employer (See Instructions) 		
	Retired	salion, out the (eee moduleters)	Employer (God mondonoris	,		
	Date 08/09/2023	Full name of contributor out-of-state PAC (ID# Gibb, Catherine Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$40.00
		Plano, TX 75074				
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/03/2023	Full name of contributor out-of-state PAC (ID# Gilbert, Jerri Contributor address; City; State; Zip Code Plano, TX 75023	:)		Amount of Contribution (\$)	\$40.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 07/26/2023	Full name of contributor out-of-state PAC (ID# Gough, Jane Contributor address; City; State; Zip Code Plano, TX 75025	:)		Amount of Contribution (\$)	\$38.11
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CO	ONTRIBUTION	NS 		SCHEDUL	E A1
	The Instru	ction Guide explains how to	o complete this for	m.	1	Total pages Schedule A1: Sch: 5/12 Rpt: 8/27	
2	FILER NAME Conner Harr	ington Republican Women			3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 07/26/2023	5 Full name of contributor Halsey, Sandra6 Contributor address; City; State)	7	Amount of Contribution (\$)	\$76.72
		Plano, TX 75023					
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Date 12/29/2023	Full name of contributor Halsey, Sandra Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code		•	Amount of Contribution (\$)	\$300.00
	Principal occu	Plano, TX 75023 pation / Job title (See Instructions)		Employer (See Instructions	-, 		
	Retired	pation / 300 title (See instructions)		Employer (See instructions	·)		
	Date 08/03/2023	Full name of contributor Johann, Carla Contributor address; City; State	out-of-state PAC (ID#: ; Zip Code)		Amount of Contribution (\$)	\$40.00
		Plano, TX 75075					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/29/2023	Full name of contributor Johann, Carla Contributor address; City; State Plano, TX 75075	out-of-state PAC (ID#:e; Zip Code		-	Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/26/2023	Full name of contributor Johnson, Alan Contributor address; City; State Plano, TX 75074	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$76.72
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 6/12 Rpt: 9/27	
2	FILER NAME Conner Harr	ngton Republican Women		3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 12/05/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$192.04
		Plano, TX 75074				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 07/26/2023	Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$80.00
	Principal occu Manager	Plano, TX 75093 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 11/30/2023	Full name of contributor out-of-state PAC (IE Johnson, Kelly Ann Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$230.15
		Plano, TX 75093				
	Principal occu Manager	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 07/26/2023	Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$80.00
	Principal occu Retired	Plano, TX 75093 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 12/29/2023	Full name of contributor out-of-state PAC (IE Kriss, Joanna Contributor address; City; State; Zip Code Plano, TX 75093	D#:)		Amount of Contribution (\$)	\$125.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 7/12 Rpt: 10/27	
2	FILER NAME Conner Harr	ngton Republican Women		3	Filer ID (Ethics Commissio 00054608	n Filers)
4	Date 08/09/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$40.00
_	Dringing! aggs	McKinney, TX 75069	0 Employer (Con Instruction	<u></u>		
8	Business Ow	pation / Job title (See Instructions) rner	9 Employer (See Instructions	S)		
	Date 08/09/2023	Full name of contributor out-of-state PAC (II McCall, Cam Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$80.00
	Dringinal accu	McKinney, TX 75072 pation / Job title (See Instructions)	Employer (See Instructions	c)		
	Supervisor	oation / Job title (See Instructions)	Employer (See instructions	3)		
	Date 12/08/2023	Full name of contributor out-of-state PAC (II McCall, Jenny Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$100.00
		Plano, TX 75093				
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 08/09/2023	Full name of contributor out-of-state PAC (If McCrann, Judith Contributor address; City; State; Zip Code Plano, TX 75074	D#:)		Amount of Contribution (\$)	\$40.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/29/2023	Full name of contributor out-of-state PAC (II McCrann, Judith Contributor address; City; State; Zip Code Plano, TX 75074	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 8/12 Rpt: 11/27	
2	FILER NAME Conner Harr	ngton Republican Women		3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 07/26/2023	 Full name of contributor out-of-state PAC (ID#: Miklosh, Corrine Contributor address; City; State; Zip Code 	_	7	Amount of Contribution (\$)	\$76.72
		Plano, TX 75093				
8	Principal occu retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/30/2023	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$119.66
	Principal occu	Plano, TX 75093 pation / Job title (See Instructions)	Employer (See Instructions	 - s)		
	retired					
	Date 07/26/2023	Full name of contributor out-of-state PAC (ID#:_ Miller, Paula Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$38.11
		McKinney, TX 75070				
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/13/2023	Full name of contributor out-of-state PAC (ID#: Miller, Paula Contributor address; City; State; Zip Code McKinney, TX 75070)		Amount of Contribution (\$)	\$100.00
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/03/2023	Full name of contributor out-of-state PAC (ID#: Morris, Deborah Contributor address; City; State; Zip Code Plano, TX 75023			Amount of Contribution (\$)	\$40.00
	Principal occu Photographe	pation / Job title (See Instructions) r	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this t	orm.	1	Total pages Schedule A1: Sch: 9/12 Rpt: 12/27	
2	FILER NAME Conner Harri	ngton Republican Women		3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 12/29/2023	 Full name of contributor out-of-state PAC (ID#: Morris, Deborah Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$220.00
_	Dringing Lagor	Plano, TX 75023	Contractions	$\overline{}$		
8	Principal occul Photographe	pation / Job title (See Instructions) r	9 Employer (See Instructions	5)		
	Date 08/03/2023	Full name of contributor out-of-state PAC (ID#:_Mott, Maria Contributor address; City; State; Zip Code Plano, TX 75093			Amount of Contribution (\$)	\$40.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Business Ow	ner				
	Date 11/13/2023	Full name of contributor)		Amount of Contribution (\$)	\$100.00
		Plano, TX 75093				
	Principal occu Business Ow	oation / Job title (See Instructions) rner	Employer (See Instructions	()		
	Date 12/29/2023	Full name of contributor out-of-state PAC (ID#:_Phillips, Steven Contributor address; City; State; Zip Code Plano, TX 75025			Amount of Contribution (\$)	\$40.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 07/27/2023	Full name of contributor out-of-state PAC (ID#:_Reeves, Sue Contributor address; City; State; Zip Code Fairview, TX 75069			Amount of Contribution (\$)	\$38.11
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
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	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/12 Rpt: 13/27	
2	FILER NAME Conner Harri	ngton Republican Women		3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 07/27/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$38.11
_		Parker, TX 75002-3027	T			
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 11/13/2023	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Parker, TX 75002-3027 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Date 08/03/2023	Full name of contributor out-of-state PAC (ID#:_ Rushton, Jody Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$40.00
		Plano, TX 75093				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/29/2023	Full name of contributor out-of-state PAC (ID#:_ Rushton, Jody Contributor address; City; State; Zip Code Plano, TX 75093)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> 5)		
	Date 08/03/2023	Full name of contributor out-of-state PAC (ID#:_Sealy, LaVeta Contributor address; City; State; Zip Code McKinney, TX 75070)		Amount of Contribution (\$)	\$40.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	 ;)		
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	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 11/12 Rpt: 14/27	
2	FILER NAME Conner Harr	ington Republican Women		3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 12/29/2023	5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$200.00
_	Dringing Lagor	McKinney, TX 75070	O Franks or (Cas Instructions			
8	Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions)					
	Date Full name of contributor out-of-state PAC (ID#:) 08/09/2023 Self, Keith Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00	
	Dringing Logg	McKinney, TX 75071-1548	Employer (Con Instructions			
	U.S. Congre	pation / Job title (See Instructions) ssman	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/15/2023 Slaughter, Michael Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$134.13	
		McKinney, TX 75069				
	Principal occu Landscape (pation / Job title (See Instructions) Company	Employer (See Instructions)		
	Date 12/29/2023	Full name of contributor out-of-state PAC (ID#:_Smith, Sara Contributor address; City; State; Zip Code Plano, TX 75075			Amount of Contribution (\$)	\$100.00
	Principal occupation / Job title (See Instructions) Retired Employer (See Instructions))			
	Date 12/29/2023	Full name of contributor out-of-state PAC (ID#:_Stovall, Janet Contributor address; City; State; Zip Code Plano, TX 75093)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 12/12 Rpt: 15/27		
2	FILER NAME Conner Harr	rington Republican Women		3	Filer ID (Ethics Commission 00054608	n Filers)	
4	Date 08/09/2023	Date 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$40.00	
		Plano, TX 75086					
8	Principal occu Retired	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 12/29/2023				Amount of Contribution (\$)	\$100.00	
	Principal occu	Plano, TX 75086 upation / Job title (See Instructions)	Employer (See Instructions	 i)			
	Date Full name of contributor out-of-state PAC (ID#:) 07/17/2023 Webb, Duncan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00		
		Plano, TX 75024	- 100				
	•	upation / Job title (See Instructions) by Commissioner	Employer (See Instructions	5)			
Date Full name of contributor out-of-state PAC (ID#:_ 12/29/2023 Yancey, Jane Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$200.00		
Plano, TX 75074 Principal occupation / Job title (See Instructions) Emp Retired			Employer (See Instructions	<u> </u>			

SCHEDULE F1

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

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/12 Rpt: 16/27	Conner Harrington Republican Women 00054608
4 Date	5 Payee name
10/01/2023	Collin County Republican Headquarters
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$150.00	2963 W. 15th St. #2981
Expenditure from	
corporate funds	Plano, TX 75075
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense room for meetings
	Toom for meetings
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Dougo nama
	Payee name
11/14/2023	Donley, Diane
Amount (\$)	Payee address; City; State; Zip Code
\$94.44	3220 Bandolino Lane
Expenditure from	
corporate funds	Plano, TX 75075
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 TFRW convention fee
	TERVI CONVENIION IEE
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
D-1-	
Date 08/23/2023	Payee name
	Halsey, Sandra
Amount (\$)	Payee address; City; State; Zip Code
\$99.00	2600 Bengal Lane
Expenditure from	
corporate funds	Plano, TX 75023
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense Dinner meeting deposit reimbursement
	Diffile theeting deposit felitibulsement
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/12 Rpt: 17/27	Conner Harrington Republican Women	00054608
4 Date	5 Payee name	
10/10/2023	Halsey, Sandra	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$475.00	2600 Bengal Lane	
— Foresedit ve from		
Expenditure from corporate funds	Plano, TX 75023	
8 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 NFRW convention fee
		W KW convention for
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Lught Office held
expenditure to benefit C/OI		agnit amos nord
Date	Device name	
11/14/2023	Payee name Halsey, Sandra	
	•	
Amount (\$)	Payee address; City; State; Zip C	oue
\$94.44	2600 Bengal Lane	
Expenditure from corporate funds	Plano, TX 75023	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Event Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
		TFRW convention fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught Office held
experientare to benefit 6/61	'	
Date	Payee name	
12/31/2023	Hatchell, Pat	
Amount (\$)	Payee address; City; State; Zip C	ode
\$42.97	1216 Balboa Cr.	
— Foresediture from		
Expenditure from corporate funds	Plano, TX 75075	
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.
LXI LIBITORE		Check if Austin, TX, officeholder living expense
		reimburse member for GEM girls event food
Commission ONII V if dispose	Condidate/Officeholder name	Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught Office held

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

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 3/12 Rpt: 18/27	2 FILER NAME Conner Harrington Republican Women 3 Filer ID (Ethics Commission Filers) 00054608
4 Date 08/08/2023	5 Payee name Hathaway, Victoris
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 4520 Arlen Drive
Expenditure from corporate funds	Plano, TX 75093
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense scholarship
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date 07/03/2023	Payee name Icontact
Amount (\$) \$21.65 Expenditure from corporate funds	Payee address; City; State; Zip Code 2121 RDU Center Drive 4th Floor Morrisville, NC 27560
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 08/03/2023	Payee name Icontact
Amount (\$) \$21.65 Expenditure from corporate funds	Payee address; City; State; Zip Code 2121 RDU Center Drive 4th Floor Morrisville, NC 27560
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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:	· · · · · · · · · · · · · · · · · · ·	
Sch: 4/12 Rpt: 19/27	Conner Harrington Republican Women 00054608	
4 Date	5 Payee name	
09/03/2023	Icontact	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$21.65	2121 RDU Center Drive	
Evpanditure from	4th Floor	
Expenditure from corporate funds	Morrisville, NC 27560	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	website	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
Date	Payee name	
10/03/2023	Icontact	
Amount (\$)	Payee address; City; State; Zip Code	
\$21.65	2121 RDU Center Drive	
	4th Floor	
Expenditure from corporate funds	Morrisville, NC 27560	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense website	
	WEDSILE	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	n	
Date	Payee name	
11/02/2023	Icontact	
Amount (\$)	Payee address; City; State; Zip Code	
\$21.65	2121 RDU Center Drive	
_	4th Floor	
Expenditure from corporate funds	Morrisville, NC 27560	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
LAFLINDITURE	Check if Austin, TX, officeholder living expense	
	website	
Complete CNII V if direct	Candidate/Officeholder name Office sought Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1. Total names Calculula E1	
1 Total pages Schedule F1:	
Sch: 5/12 Rpt: 20/27	Conner Harrington Republican Women 00054608
4 Date	5 Payee name
12/04/2023	Icontact
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$21.65	2121 RDU Center Drive
	4th Floor
Expenditure from corporate funds	Morrisville, NC 27560
8 PURPOSE	
OF	
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	website
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
11/14/2023	Johnson, Diane
Amount (\$)	Payee address; City; State; Zip Code
\$94.44	2408 Peachtree
Expenditure from corporate funds	Plano, TX 75074
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
	TFRW convention fee
	THI TWO GOTTVETTEGT THE
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
Date	Payee name
09/04/2023	Miklosh, Corrine
Amount (\$)	Payee address; City; State; Zip Code
\$135.96	3525 Chaney Lane
Expenditure from corporate funds	Plano, TX 75093
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
	Legislative Day reimbursements
Complete CALL V if direct	Condidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	
, .,	

SCHEDULE F1

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

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

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 6/12 Rpt: 21/27	Conner Harrington Republican Women	00054608
4 Date	5 Payee name	
11/14/2023	Miklosh, Corrine	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$94.44	3525 Chaney Lane	
- Funanditura from		
Expenditure from corporate funds	Plano, TX 75093	
8 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 TFRW convention fee
		THAN CONVENIENT ICC
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Lught Office held
expenditure to benefit C/OI		
Date	Payee name	
10/10/2023	Miller, Kathy	
Amount (\$)	Payee address; City; State; Zip C	ode
\$475.00	1416 Seabrook Drive	oue
\$475.00	1410 Seablook Drive	
Expenditure from corporate funds	Plano, TX 75023	
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 NFRW convention fees
		W KW convention rees
Complete ONLY if direct	Candidate/Officeholder name Office so	Luaht Office held
expenditure to benefit C/OI		
Date	Payee name	
11/14/2023	Miller, Paulette	
Amount (\$)	Payee address; City; State; Zip C	ode
\$94.44	6417 Taprock	
·	·	
Expenditure from corporate funds	McKinney, TX 75070	
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 TFRW convention fee
Complete ONLY if direct	Candidate/Officeholder name Office so	Luaht Office held
expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
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

Candidate/Officenolder/Politica	The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 7/12 Rpt: 22/27	Conner Harrington Republican Women 00054608		
4 Date	5 Payee name		
11/14/2023	Mott, Maria		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$94.44	4401 Arlen Ct.		
Expenditure from corporate funds	Plano, TX 75093		
8 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		
	TFRW convention fee		
	THE TOTAL CONTROL OF THE CONTROL OF		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			
Data			
Date	Payee name		
11/14/2023	Reynolds, Daryl		
Amount (\$)	Payee address; City; State; Zip Code		
\$94.44	6805 Cheswick Ct.		
Expenditure from			
corporate funds	Parker, TX 75002		
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 TFRW convention fee		
	TFRW convention lee		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI			
Date	Payee name		
08/08/2023	Roman Cucina		
Amount (\$)	Payee address; City; State; Zip Code		
\$971.98	201 E. Bethany		
Expenditure from			
corporate funds	Allen, TX 75013		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Food/Beverage Expense		
EXPENDITORE	Check if Austin, TX, officeholder living expense		
	Dinner meeting that was reimbursed		
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			
experiente to benefit 6/01	<u> </u>		

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

Credit Card Payment	The Instruction Guide explains how to compl	ete this form.		
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
Sch: 8/12 Rpt: 23/27	Conner Harrington Republican Women	00054608		
4 Date	5 Payee name			
11/14/2023	Rushton, Jody			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$94.44	4500 Barwyn Ct.			
- Evnanditura from				
Expenditure from corporate funds	Plano, TX 75093			
8 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.		
LA LIBITORE		Check if Austin, TX, officeholder living expense TFRW convention fee		
		TRVV Convention lee		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
expenditure to benefit C/OI		Office field		
Data				
Date	Payee name			
11/14/2023	Sealy, LaVeta (Ms.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$94.44	3805 Bitterroot Trail			
Expenditure from				
corporate funds	McKinney, TX 75070			
PURPOSE OF	- (Description		
EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		TFRW convention fee		
		11 111 65.115.1155		
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
expenditure to benefit C/OI				
Date	Payee name			
12/31/2023	Sealy, LaVeta (Ms.)			
Amount (\$) \$57.03	Payee address; City; State; Zip Code			
\$57.03	3805 Bitterroot Trail			
Expenditure from				
corporate funds	McKinney, TX 75070			
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		
		reimburse member for GEM girl event bears		
		g event search		
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 Candidate/Officeholder/Political Committee
Credit Card Doumont

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/12 Rpt: 24/27	Conner Harrington Republican Women 00054608
4 Date	5 Payee name
07/28/2023	Sunbelt Self Storage
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$103.00	2445 W. Plano Pkwy.
Expenditure from corporate funds	Plano, TX 75075
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	storage unit
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
Date	Payee name
08/28/2023	Sunbelt Self Storage
Amount (\$)	Payee address; City; State; Zip Code
\$103.00	2445 W. Plano Pkwy.
Ψ100.00	Z-HO W. Fidillo Fixwy.
Expenditure from corporate funds	Plano, TX 75075
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	storage unit
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/28/2023	Sunbelt Self Storage
Amount (\$)	Payee address; City; State; Zip Code
\$103.00	2445 W. Plano Pkwy.
\$100.00	
Expenditure from corporate funds	Plano, TX 75075
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	storage unit
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	• • • • • • • • • • • • • • • • • • •

SCHEDULE F1

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

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

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
OTHER (orders extended that is a second or secon

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: 10/12 Rpt: 25/27	Conner Harrington Republican Women 00054608
4 Date	5 Payee name
10/28/2023	Sunbelt Self Storage
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$103.00	2445 W. Plano Pkwy.
- "	
Expenditure from corporate funds	Plano, TX 75075
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense Storage unit
	Storage and
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Davies same
	Payee name
11/28/2023	Sunbelt Self Storage
Amount (\$)	Payee address; City; State; Zip Code
\$103.00	2445 W. Plano Pkwy.
Expenditure from	
corporate funds	Plano, TX 75075
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	storage unit rent
Complete ONLY if direct	Condidate/Officeholder name Office county
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/28/2023	Sunbelt Self Storage
Amount (\$)	Payee address; City; State; Zip Code
\$103.00	2445 W. Plano Pkwy.
Expenditure from	
corporate funds	Plano, TX 75075
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Storage unit
Complete CNII V if direct	Candidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 11/12 Rpt: 26/27	Conner Harrington Republican Women	00054608	
4 Date	5 Payee name		
08/02/2023	TFRW		
6 Amount (\$)	7 Payee address; City; State; Zip Co	de	
\$100.00	P.O. Box 171146		
Evpanditura from			
Expenditure from corporate funds	Austin, TX 78717-0041		
8 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 Sponsorship at convention	
		sponsorship at convention	
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	aht Office held	
expenditure to benefit C/OI		gitt Since note	
Date	Device name		
09/18/2023	Payee name TFRW		
		·	
Amount (\$)	Payee address; City; State; Zip Co	de	
\$25.30	P.O. Box 171146		
Expenditure from			
corporate funds	Austin, TX 78717-0041		
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	
		fees to TFRW for membership	
		1000 to 11.1111 to 11.011.00	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held	
expenditure to benefit C/OH			
Date	Payee name		
10/31/2023	TFRW		
Amount (\$)	Payee address; City; State; Zip Co	do	
\$25.00	P.O. Box 171146	ue	
Ψ23.00	P.O. BOX 171140		
Expenditure from	Augstin TV 70717 0041		
corporate funds	Austin, TX 78717-0041	.	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Gift/Awards/Memorials Expense	Check if Austin, TX, officeholder living expense	
		President's pin for incoming president	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held	
expenditure to benefit C/OH			

SCHEDULE F1

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

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officenolder/Politica	The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 12/12 Rpt: 27/27	Conner Harrington Republican Women 00054608		
4 Date	5 Payee name		
12/28/2023	TFRW		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$829.80	P.O. Box 171146		
Expenditure from corporate funds	Austin, TX 78717-0041		
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 Membership fees to TFRW		
	Methodishih idas to TELLAN		
2 O	Office hold		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
- I			
Date	Payee name		
09/18/2023	U.S. Postmaster		
Amount (\$)	Payee address; City; State; Zip Code		
\$248.00	3400 Coit		
Expenditure from corporate funds	Plano, TX 75075		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense Post office box		
	Lost office nov		
One of the ONE Wife disease	Office hold		
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			
- h			
Date	Payee name		
08/28/2023	WordPress.com		
Amount (\$)	Payee address; City; State; Zip Code		
\$105.53	60 29th Street #343		
Expenditure from corporate funds	San Francisco, CA 94110		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Advertising Expense		
LAFLADITORL	Check if Austin, TX, officeholder living expense		
	Website		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
experialitare to benefit G/G/T			