

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers) 00029579	2 Total pages filed: 21	OFFICE USE ONLY
3 COMMITTEE NAME Lubbock Area Republican Women PAC	Date Received ELECTRONICALLY FILED 01/16/2024	
4 TREASURER NAME Moriarty, Sharma L.	Date Hand-delivered or Date Postmarked	
5 ORIGINAL REPORT TYPE <input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 10th day after campaign treasurer resignation <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution report <input type="checkbox"/> 8th day before election <input type="checkbox"/> Other (specify) _____	Receipt # Amount	
6 ORIGINAL PERIOD COVERED Month Day Year Month Day Year 01/01/2023 THROUGH 06/30/2023	Date Processed	
Date Imaged		

7 EXPLANATION OF CORRECTION
 I just opened the prior report to see the total amount of contributions so I could determine whether I had a \$190 threshold or \$60. I did not make any changes to the report.

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Sharma L. Moriarty

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00029579	2 Total pages filed: 21
3 COMMITTEE NAME Lubbock Area Republican Women PAC		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 01/16/2024	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 6315 Lubbock, TX 79493-6315		
	5 CAMPAIGN TREASURER NAME	MS / MRS / MR NICKNAME	FIRST Sharma L. LAST Moriarty
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 12513 Quaker Ave. Ste. B Lubbock, TX 79424		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 12513 Quaker Ave. Ste. B Lubbock, TX 79424		
8 CAMPAIGN TREASURER PHONE	AREA CODE (806)	PHONE NUMBER 470-5277	EXTENSION
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year Month Day Year 01/01/2023 THROUGH 06/30/2023		
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Lubbock Area Republican Women PAC	13 Filer ID (Ethics Commission Filers) 00029579
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported Ballot ID:null Election Date: Desc:Donated to Republican Party of Texas Election Integrity Fund
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 8,116.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 17,096.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 2,900.77
	4. TOTAL POLITICAL EXPENDITURES	\$ 33,409.16
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 7,986.51
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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

Sharma L. Moriarty

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
4 of 21

17 COMMITTEE NAME Lubbock Area Republican Women PAC		18 Filer ID 00029579	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	17,096.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$	
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$	
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	33,409.16
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/7 Rpt: 5/21
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atcheson, Judi (Mrs.)	7 Amount of Contribution (\$) \$145.00
	6 Contributor address; City; State; Zip Code Lubbock, TX 79410	
8 Principal occupation / Job title (See Instructions) retired teacher		9 Employer (See Instructions) na
Date 03/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atcheson, Judi (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Lubbock, TX 79410	
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) na
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruegel, David (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Shallowater, TX 79363	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campaign for Charles Perry	Amount of Contribution (\$) \$400.00
	Contributor address; City; State; Zip Code Lubbock, TX 79493	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campaign for Charles Perry	Amount of Contribution (\$) \$600.00
	Contributor address; City; State; Zip Code Lubbock, TX 79493	
Principal occupation / 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: 2/7 Rpt: 6/21
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campaign for Charles Perry <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79493	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campaign for Charles Perry <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79493	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cansino, Jane (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Grassroots Engagement Director		Employer (See Instructions) Americans For Prosperity
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cansino, Jane (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Grassroots Engagement Director		Employer (See Instructions) Americans For Prosperity
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cansino, Jane (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$44.00
Principal occupation / Job title (See Instructions) Grassroots Engagement Director		Employer (See Instructions) Americans For Prosperity

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/7 Rpt: 7/21
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cansino, Jane (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Lubbock, TX 79407	
8 Principal occupation / Job title (See Instructions) Grassroots Engagement Director		9 Employer (See Instructions) Americans For Prosperity
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cansino, Jane (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Lubbock, TX 79407	
Principal occupation / Job title (See Instructions) Grassroots Engagement Director		Employer (See Instructions) Americans For Prosperity
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Home Zone	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Lubbock, TX 79413	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Carla (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Lubbock, TX 79412	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Carla (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Lubbock, TX 79412	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/7 Rpt: 8/21
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Carla (Mrs.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Lubbock, TX 79412	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Carla (Mrs.)	Amount of Contribution (\$) \$44.00
	Contributor address; City; State; Zip Code Lubbock, TX 79412	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marka, Srinath (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Lubbock, TX 79413	
Principal occupation / Job title (See Instructions) Indian Grocery Store		Employer (See Instructions) Owner
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moriarty, Sharma (Ms.)	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Wolfforth, TX 79382	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Law Firm of Sharma Moriarty
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moriarty, Sharma (Ms.)	Amount of Contribution (\$) \$22.00
	Contributor address; City; State; Zip Code Wolfforth, TX 79382	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Law Firm of Sharma Moriarty

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/7 Rpt: 9/21
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 05/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moriarty, Sharma (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Wolfforth, TX 79382	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Law Firm of Sharma Moriarty
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moriarty, Sharma (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Wolfforth, TX 79382	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Law Firm of Sharma Moriarty
Date 06/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moriarty, Sharma (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Wolfforth, TX 79382	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Law Firm of Sharma Moriarty
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pevey, Carol	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Lubbock, TX 79416	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions)
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Dorothy	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Lubbock, TX 79464	
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) D J Price Insurance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/7 Rpt: 10/21
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Dorothy <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79464	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) D J Price Insurance
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Dorothy <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79464	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) D J Price Insurance
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Render, Rube (Mr.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Render, Rube (Mr.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$520.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renteria, Tony (Mr.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413-6317	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Texas Custom Wine Works

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/7 Rpt: 11/21
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stell, Susie (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79424	7 Amount of Contribution (\$) \$2,450.00
8 Principal occupation / Job title (See Instructions) Director of Accounting		9 Employer (See Instructions) Stellar Companies
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stell, Susie (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) Director of Accounting		Employer (See Instructions) Stellar Companies

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/10 Rpt: 12/21	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
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4 Date 05/18/2023	5 Payee name Caldwell Entertainment
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6 Amount (\$) \$9,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1720 Avenue M Lubbock, TX 79401
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sound and music at Faith Family & Freedom
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/19/2023	Payee name Cotton Court Hotel
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Amount (\$) \$478.70 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1610 Broadway St. Lubbock, TX 79401
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brad Stine Hotel Room for Faith Family & Freedom Event
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/19/2023	Payee name Lubbock Women's Club
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Amount (\$) \$1,680.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2020 Broadway Lubbock, TX 79401
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly meal cost
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/10 Rpt: 13/21	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/23/2023	5 Payee name Lubbock Women's Club	
6 Amount (\$) \$1,518.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2020 Broadway Lubbock, TX 79401	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Luncheon
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/23/2023	Payee name Lubbock Women's Club	
Amount (\$) \$220.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2020 Broadway Lubbock, TX 79401	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lubbock Women's Club - Annual Dues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/13/2023	Payee name Lubbock Women's Club	
Amount (\$) \$700.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2020 Broadway Lubbock, TX 79401	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/10 Rpt: 14/21	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
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4 Date 04/21/2023	5 Payee name Lubbock Women's Club
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6 Amount (\$) \$1,056.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2020 Broadway Lubbock, TX 79401
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly lunch
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/18/2023	Payee name Lubbock Women's Club
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Amount (\$) \$1,205.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2020 Broadway Lubbock, TX 79401
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly luncheon
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/15/2023	Payee name Lubbock Women's Club
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Amount (\$) \$517.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2020 Broadway Lubbock, TX 79401
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly luncheon
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/10 Rpt: 15/21	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 05/11/2023	5 Payee name Munoz, Marci (Ms.)	
6 Amount (\$) \$1,062.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 906 Manchester Ct. Wolfforth, TX 79382	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Deposit on VIP food
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/18/2023	Candidate/Officeholder name Munoz, Marci (Ms.)	
Amount (\$) \$1,062.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 906 Manchester Ct. Wolfforth, TX 79382	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Final pymt on VIP food
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/03/2023	Candidate/Officeholder name Peoples Bank	
Amount (\$) \$44.90 <input type="checkbox"/> Expenditure from corporate funds	Office sought 5820 82nd St Lubbock, TX 79424	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bankcard Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/10 Rpt: 16/21	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/02/2023	5 Payee name Peoples Bank	
6 Amount (\$) \$44.90 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5820 82nd St Lubbock, TX 79424	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bankcard Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/03/2023	Candidate/Officeholder name Peoples Bank	
Amount (\$) \$44.90 <input type="checkbox"/> Expenditure from corporate funds	Office sought 5820 82nd St Lubbock, TX 79424	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bankcard Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/02/2023	Candidate/Officeholder name Peoples Bank	
Amount (\$) \$44.90 <input type="checkbox"/> Expenditure from corporate funds	Office sought 5820 82nd St Lubbock, TX 79424	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bankcard Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/02/2023	Candidate/Officeholder name Peoples Bank	
Amount (\$) \$44.90 <input type="checkbox"/> Expenditure from corporate funds	Office sought 5820 82nd St Lubbock, TX 79424	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bankcard Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/10 Rpt: 17/21	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 06/02/2023	5 Payee name Peoples Bank	
6 Amount (\$) \$44.90 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5820 82nd St Lubbock, TX 79424	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bankcard Processing Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2023	Payee name Peoples Bank	
Amount (\$) \$44.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5820 82nd St Lubbock, TX 79424	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2023	Payee name R.V. Nuccio & Associates, Inc.	
Amount (\$) \$201.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10148 Riverside Dr. Toluca Lake, CA 91620	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Insurance for at Faith Family & Freedom
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/10 Rpt: 18/21	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/14/2023	5 Payee name Republican Party of Texas/CRC	
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 2206 Austin, TX 78768	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Support for election integrity initiatives at the state level	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Texas Election Integrity Fund through the Republican Party of Texas
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/16/2023	Payee name Sparked Events	
Amount (\$) \$595.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5517 Jarvis St. Lubbock, TX 79416	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Balloon Garland x2 for Faith Family & Freedom
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/12/2023	Payee name Squarespace	
Amount (\$) \$272.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Subscription Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/10 Rpt: 19/21	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/14/2023	5 Payee name Stine, Brad (Mr.)	
6 Amount (\$) \$1,250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 1129 Franklin, TN 37065	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Comedian at Faith Family & Freedom Event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/19/2023	Payee name Stine, Brad (Mr.)	
Amount (\$) \$4,568.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1129 Franklin, TN 37065	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Comedian at Faith Family & Freedom
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/20/2023	Payee name Stine, Brad (Mr.)	
Amount (\$) \$160.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1129 Franklin, TN 37065	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Per Diem for Comedian at Faith Family & Freedom Event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/10 Rpt: 20/21	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/27/2023	5 Payee name Texas Federation of Republican Women	
6 Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13740 N Hwy 183 Suite J4 Austin, TX 78746	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/01/2023	Candidate/Officeholder name Texas Federation of Republican Women	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/16/2023	Candidate/Officeholder name Texas Federation of Republican Women	
Amount (\$) \$125.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/10 Rpt: 21/21	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 06/15/2023	5 Payee name Texas Federation of Republican Women	
6 Amount (\$) \$225.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13740 N Hwy 183 Suite J4 Austin, TX 78746	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/16/2023	Candidate/Officeholder name Texas Federation of Republican Women	
Amount (\$) \$125.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/20/2023	Candidate/Officeholder name Walmart	
Amount (\$) \$1,468.12 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Projector & Gift cards for speakers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		