

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers) 00080865	2 Total pages filed: 60	OFFICE USE ONLY	
3 COMMITTEE NAME Liberty Belles Republican Women			Date Received ELECTRONICALLY FILED 01/14/2024
4 TREASURER NAME Brown , Portia K. (Ms.)			Date Hand-delivered or Date Postmarked
5 ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> Runoff	Receipt #
	<input 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	Amount
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Other (specify) _____	Date Processed
6 ORIGINAL PERIOD COVERED	Month Day Year 07/01/2023	THROUGH	Month Day Year 12/31/2023
Date Imaged			

7 EXPLANATION OF CORRECTION
The items added had been in a folder overlooked in the earlier reporting. Note that this correction is, however, made prior to the filing deadline.

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.

Ms. Portia K. Brown

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) 00080865	2 Total pages filed: 60
3 COMMITTEE NAME Liberty Belles Republican Women		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 01/14/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 1081 Conroe, TX 77305	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Ms. Portia K.	
		NICKNAME LAST SUFFIX Brown	
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 13982 East FM 1097 Rd. Willis, TX 77378	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 13982 East FM 1097 Rd. Willis, TX 77378	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (281) 300-9983	
9 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input 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 07/01/2023 THROUGH 12/31/2023	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <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 Liberty Belles Republican Women	13 Filer ID (Ethics Commission Filers) 00080865
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,057.50
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 66,048.47
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.

Ms. Portia K. Brown

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC

17 COMMITTEE NAME Liberty Belles Republican Women		18 Filer ID (Ethics Commission Filers) 00080865
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,057.50
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 checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 0.00
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 12,624.41
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: 1/44 Rpt: 5/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 08/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alford, Sharon <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77318	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allman, Linda <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allman, Linda <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apostolo, Sandy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apostolo, Sandy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/44 Rpt: 6/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apostolo, Sandy <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apostolo, Sandy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apostolo, Sandy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arbuckle, Holly <hr/> Contributor address; City; State; Zip Code Magnolia , TX 77354	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Political Consultant		Employer (See Instructions) Hon. Morgan Luttrell
Date 09/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Backen, Carolyn <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/44 Rpt: 7/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Backen, Carolyn	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Conroe, TX 77304		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Backen, Carolyn	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Backen, Carolyn	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Backen, Carolyn	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balzola, Cynthia	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Willis, TX 77378		
Principal occupation / Job title (See Instructions) retired nurse		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/44 Rpt: 8/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balzola, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77378	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) retired nurse		9 Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baradaran, Shiva <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Admin Aide		Employer (See Instructions) Sen Brandon Creighton
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bateman, Patty <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bays, Kristin (Judge) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) District Judge		Employer (See Instructions) Self
Date 09/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belin, Charlotte <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$57.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/44 Rpt: 9/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belin, Charlotte <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$76.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belin, Charlotte <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belin, Charlotte <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$57.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belin, Charlotte <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$76.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bilby, Lois <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/44 Rpt: 10/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bilby, Lois <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77318	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bilby, Lois <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bilby, Lois <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blaney, Stacey <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CEO Software Development		Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blaney, Stacey <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) CEO Software Development		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/44 Rpt: 11/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blaney, Stacey <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$73.00
8 Principal occupation / Job title (See Instructions) CEO Software Development		9 Employer (See Instructions)
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bott, Janet <hr/> Contributor address; City; State; Zip Code Conore, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brasher, Cynthia <hr/> Contributor address; City; State; Zip Code Conroe, TX 77302	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brasher, Cynthia <hr/> Contributor address; City; State; Zip Code Conroe, TX 77302	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Portia <hr/> Contributor address; City; State; Zip Code Willis, TX 77378	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/44 Rpt: 12/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Portia <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77378	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Portia <hr/> Contributor address; City; State; Zip Code Willis, TX 77378	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cappadonna, Jo Ann <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$54.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cappadonna, Jo Ann <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cappadonna, Jo Ann <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/44 Rpt: 13/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cash, Heather	7 Amount of Contribution (\$) \$88.00
6 Contributor address; City; State; Zip Code Willis, TX 77318		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cash for Constable, Philip	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Willis, TX 77318		
Principal occupation / Job title (See Instructions) Constable		Employer (See Instructions) Montgomery County
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Kenneth	Amount of Contribution (\$) \$76.00
Contributor address; City; State; Zip Code Willis, TX 77378		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Kenneth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Willis, TX 77378		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Kenneth	Amount of Contribution (\$) \$38.00
Contributor address; City; State; Zip Code Willis, TX 77378		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/44 Rpt: 14/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Kenneth <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77378	7 Amount of Contribution (\$) \$38.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Kenneth <hr/> Contributor address; City; State; Zip Code Willis, TX 77378	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Kenneth <hr/> Contributor address; City; State; Zip Code Willis, TX 77378	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) Attorney at Law		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Melissa <hr/> Contributor address; City; State; Zip Code Willis, TX 77378	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christ, Kristin <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77355	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Southern Heritage Consulting

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/44 Rpt: 15/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collings, Elaine <hr/> 6 Contributor address; City; State; Zip Code Montgomery, TX 77356	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowe, Mary Jane <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dartez, Mia <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Elizabeth <hr/> Contributor address; City; State; Zip Code Willis, TX 77378	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Elizabeth <hr/> Contributor address; City; State; Zip Code Willis, TX 77378	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/44 Rpt: 16/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeStefano, Sally	7 Amount of Contribution (\$) \$19.00
6 Contributor address; City; State; Zip Code Conroe, TX 77304		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Divilbiss, Mary Lu	Amount of Contribution (\$) \$38.00
Contributor address; City; State; Zip Code conroe, TX 77304		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Divilbiss, Mary Lu	Amount of Contribution (\$) \$38.00
Contributor address; City; State; Zip Code conroe, TX 77304		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Divilbiss, Mary Lu	Amount of Contribution (\$) \$55.00
Contributor address; City; State; Zip Code conroe, TX 77304		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Divilbiss, Mary Lu	Amount of Contribution (\$) \$38.00
Contributor address; City; State; Zip Code conroe, TX 77304		
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: 13/44 Rpt: 17/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doolittle, Sherry <hr/> 6 Contributor address; City; State; Zip Code Montgomery, TX 77316	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doolittle, Sherry <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)
Date 09/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dukes, Shirley <hr/> Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Ruth <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77318	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faubel, Julie <hr/> Contributor address; City; State; Zip Code Montgomery , TX 77356	Amount of Contribution (\$) \$45.50
Principal occupation / Job title (See Instructions) Texas Federation Republican Women		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/44 Rpt: 18/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faubel, Julie	7 Amount of Contribution (\$) \$19.00
6 Contributor address; City; State; Zip Code Montgomery , TX 77356		
8 Principal occupation / Job title (See Instructions) Texas Federation Republican Women		9 Employer (See Instructions)
Date 09/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol	Amount of Contribution (\$) \$36.50
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/44 Rpt: 19/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$36.50
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions)
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Mark <hr/> Contributor address; City; State; Zip Code Splendora , TX 77372	Amount of Contribution (\$) \$44.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glezman, Diedra <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glezman, Diedra <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greathouse, Anna <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/44 Rpt: 20/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, B D (The Honorable)	7 Amount of Contribution (\$) \$19.00
6 Contributor address; City; State; Zip Code Conroe, TX 77301		
8 Principal occupation / Job title (See Instructions) County Attorney		9 Employer (See Instructions) Montgomery County
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, B D (The Honorable)	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77301		
Principal occupation / Job title (See Instructions) County Attorney		Employer (See Instructions) Montgomery County
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grohs, Birgitta	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Montgomery, TX 77356		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grohs, Birgitta	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Montgomery, TX 77356		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hafley, John (The Honorable)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Magnolia, TX 77355		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/44 Rpt: 21/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haines, Martha <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77301	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) Retired R.N.		9 Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haines, Martha <hr/> Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired R.N.		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Stephanie <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Stephanie <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Stephanie <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/44 Rpt: 22/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Stephanie <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77386	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Stephanie <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 09/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardman, Harry <hr/> Contributor address; City; State; Zip Code Conroe, TX 77303	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Lone Star Water Conservation Board
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardman, Harry <hr/> Contributor address; City; State; Zip Code Conroe, TX 77303	Amount of Contribution (\$) \$26.50
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Lone Star Water Conservation Board
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hataway, Carolyn McWilliams <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/44 Rpt: 23/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hataway, Carolyn McWilliams	7 Amount of Contribution (\$) \$38.00
6 Contributor address; City; State; Zip Code Conroe, TX 77304		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hataway, Carolyn McWilliams	Amount of Contribution (\$) \$55.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson Campaign, Rand	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Conroe, TX 77301		
Principal occupation / Job title (See Instructions) Sheriff		Employer (See Instructions) Montgomery County
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogan, Joanne	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Rocky Point, NY 11778		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogan, Joanne	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Rocky Point, NY 11778		
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: 20/44 Rpt: 24/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogan, Joanne	7 Amount of Contribution (\$) \$74.00
6 Contributor address; City; State; Zip Code Rocky Point, NY 11778		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jane	Amount of Contribution (\$) \$55.00
Contributor address; City; State; Zip Code Willis, TX 77318		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jane	Amount of Contribution (\$) \$38.00
Contributor address; City; State; Zip Code Willis, TX 77318		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jane	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Willis, TX 77318		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Susan	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77301		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/44 Rpt: 25/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Susan 6 Contributor address; City; State; Zip Code Conroe, TX 77301	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Melissa Contributor address; City; State; Zip Code Co, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) home school teacher		Employer (See Instructions)
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Melissa Contributor address; City; State; Zip Code Co, TX 77304	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) home school teacher		Employer (See Instructions)
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Melissa Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) home school teacher		Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Melissa Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) home school teacher		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/44 Rpt: 26/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kasprzak, Lindsey <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions)
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kasprzak, Lindsey <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$57.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kasprzak, Lindsey <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaylor, Carole <hr/> Contributor address; City; State; Zip Code Conroe, TX 77303	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keyser, Patsy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired teacher		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/44 Rpt: 27/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Kim	7 Amount of Contribution (\$) \$19.00
6 Contributor address; City; State; Zip Code Panorama Village, TX 77304		
8 Principal occupation / Job title (See Instructions) Retired Educator		9 Employer (See Instructions)
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Kim	Amount of Contribution (\$) \$93.00
Contributor address; City; State; Zip Code Panorama Village, TX 77304		
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Kim	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Panorama Village, TX 77304		
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions)
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Kim	Amount of Contribution (\$) \$38.00
Contributor address; City; State; Zip Code Panorama Village, TX 77304		
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions)
Date 09/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsel, Cheryl	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
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: 24/44 Rpt: 28/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 08/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kobarg, Richard	7 Amount of Contribution (\$) \$19.00
6 Contributor address; City; State; Zip Code Conroe, TX 77304		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kobarg, Richard	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kobarg, Richard	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kobarg, Richard	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kobarg, Richard	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
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: 25/44 Rpt: 29/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laird, Claudia (Judge) <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77386	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Montgomery County
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lonon, Karen <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lonon, Karen <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$56.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luecke, Ann <hr/> Contributor address; City; State; Zip Code conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luecke, Ann <hr/> Contributor address; City; State; Zip Code conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/44 Rpt: 30/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lundy, Sandy	7 Amount of Contribution (\$) \$19.00
6 Contributor address; City; State; Zip Code Conroe, TX 77304		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lundy, Sandy	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lundy, Sandy	Amount of Contribution (\$) \$54.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mack, Wayne (Judge)	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Conroe, TX 77305-2234		
Principal occupation / Job title (See Instructions) Justice of The Peace		Employer (See Instructions) Montgomery County
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maggio, Pearl	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code The Woodlands, TX 77384		
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: 27/44 Rpt: 31/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallin, Anita <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77303	7 Amount of Contribution (\$) \$38.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions)
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallin, Anita <hr/> Contributor address; City; State; Zip Code Conroe, TX 77303	Amount of Contribution (\$) \$110.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Caroline <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAbee, Wanda <hr/> Contributor address; City; State; Zip Code New Caney, TX 77357	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGrath, Ruthie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/44 Rpt: 32/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGrath, Ruthie	7 Amount of Contribution (\$) \$19.00
6 Contributor address; City; State; Zip Code Conroe, TX 77304		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGrath, Ruthie	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meder, Sue	Amount of Contribution (\$) \$55.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melancon, Alice	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77385		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melancon, Alice	Amount of Contribution (\$) \$26.50
Contributor address; City; State; Zip Code Conroe, TX 77385		
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: 29/44 Rpt: 33/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melder, Webb	7 Amount of Contribution (\$) \$35.00
6 Contributor address; City; State; Zip Code Conroe, TX 77301		
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metcalf, Will (Rep.)	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) Montgomery County
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millsaps, Hayley	Amount of Contribution (\$) \$74.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Legislative Staff		Employer (See Instructions) Texas House
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modeland, Vicki	Amount of Contribution (\$) \$55.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Bonnie	Amount of Contribution (\$) \$76.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
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: 30/44 Rpt: 34/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Bonnie <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Bonnie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olszowy, Sylvia <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olszowy, Sylvia <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olszowy, Sylvia <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/44 Rpt: 35/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olszowy, Sylvia <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77318	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olszowy, Sylvia <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Daniel <hr/> Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sheriff Deputy		Employer (See Instructions) Montgomery County Sheriff
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Melody <hr/> Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Melody <hr/> Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/44 Rpt: 36/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Melody <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77301	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions)
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Persinger, Jennifer <hr/> Contributor address; City; State; Zip Code Conroe, TX 77306	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prejean, Cynthia <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Flight Attendant		Employer (See Instructions)
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Debbie <hr/> Contributor address; City; State; Zip Code Willis, TX 77378	Amount of Contribution (\$) \$44.00
Principal occupation / Job title (See Instructions) Campaign Assistant		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sargent, Bernie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Historian		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/44 Rpt: 37/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sargent, Bernie <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Historian		9 Employer (See Instructions)
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sargent, Melissa <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Merchandiser		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sargent, Melissa <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Merchandizer		Employer (See Instructions)
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seiler, Michael <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$76.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seiler, Michael <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/44 Rpt: 38/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seiler, Michael <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77382	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seiler, Michael <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simons, Deborah <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simons, Deborah <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southern Heritage Consulting <hr/> Contributor address; City; State; Zip Code Pinehurst, TX 77362	Amount of Contribution (\$) \$38.00
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: 35/44 Rpt: 39/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staat, Julie <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77302	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) Bank Officer		9 Employer (See Instructions) CML
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staat, Julie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77302	Amount of Contribution (\$) \$55.50
Principal occupation / Job title (See Instructions) Bank Officer		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staat, Julie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77302	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Bank Officer		Employer (See Instructions)
Date 09/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steinmann, Brandon <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Montgomery County Clerk		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steinmann, Jane <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/44 Rpt: 40/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suffield, Janis	7 Amount of Contribution (\$) \$19.00
	6 Contributor address; City; State; Zip Code Panorama Village, TX 77304	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Blackfield Investments
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taglienti, Katherine Wilson	Amount of Contribution (\$) \$19.00
	Contributor address; City; State; Zip Code Spring, TX 77379	
Principal occupation / Job title (See Instructions) Legal Accounting		Employer (See Instructions) Global IT
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taglienti, Katherine Wilson	Amount of Contribution (\$) \$19.00
	Contributor address; City; State; Zip Code Spring, TX 77379	
Principal occupation / Job title (See Instructions) Legal Accounting		Employer (See Instructions) Global IT
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taglienti, Katherine Wilson	Amount of Contribution (\$) \$36.50
	Contributor address; City; State; Zip Code Spring, TX 77379	
Principal occupation / Job title (See Instructions) Legal Accounting		Employer (See Instructions) Global IT
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Margie	Amount of Contribution (\$) \$19.00
	Contributor address; City; State; Zip Code Montgomery, TX 77316	
Principal occupation / Job title (See Instructions) Public Relations		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/44 Rpt: 41/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Margie <hr/> 6 Contributor address; City; State; Zip Code Montgomery, TX 77316	7 Amount of Contribution (\$) \$36.50
8 Principal occupation / Job title (See Instructions) Public Relations		9 Employer (See Instructions) Self
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Margie <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Public Relations		Employer (See Instructions) Self
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Judi <hr/> Contributor address; City; State; Zip Code Conroe, TX 77303	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Judi <hr/> Contributor address; City; State; Zip Code Conroe, TX 77303	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Judi <hr/> Contributor address; City; State; Zip Code Conroe, TX 77303	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/44 Rpt: 42/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Janet <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77318	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Janet <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Janet <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Janet <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillman, Sarah <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) district director		Employer (See Instructions) rep. will metcalf

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/44 Rpt: 43/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillman, Sarah	7 Amount of Contribution (\$) \$38.00
6 Contributor address; City; State; Zip Code Conroe, TX 77304		
8 Principal occupation / Job title (See Instructions) district director		9 Employer (See Instructions) rep. will metcalf
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillman, Sarah	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) district director		Employer (See Instructions) rep. will metcalf
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillman, Sarah	Amount of Contribution (\$) \$38.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) district director		Employer (See Instructions) rep. will metcalf
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Traylor, Paulette	Amount of Contribution (\$) \$36.50
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Traylor, Paulette	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/44 Rpt: 44/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Traylor, Paulette <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) Retired Educator		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underdown, Marie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagers Smith, Mary <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagers Smith, Mary <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagers Smith, Mary <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/44 Rpt: 45/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Janet <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77378	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) Feed Store Owner		9 Employer (See Instructions) Self
Date 08/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Robert <hr/> Contributor address; City; State; Zip Code Willis, TX 77378	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) Feed Store Owner		Employer (See Instructions) Self
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weems, Aurelia <hr/> Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)
Date 08/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westlake, Janet <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions)
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westlake, Janet <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/44 Rpt: 46/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westlake, Janet <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77318	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Real Estate Agent		9 Employer (See Instructions)
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westlake, Janet <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiesner, Cindy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiesner, Cindy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Jane <hr/> Contributor address; City; State; Zip Code Panorama Village, TX 77304	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/44 Rpt: 47/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 08/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Jane <hr/> 6 Contributor address; City; State; Zip Code Panorama Village, TX 77304	7 Amount of Contribution (\$) \$55.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Jane <hr/> Contributor address; City; State; Zip Code Panorama Village, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Jane <hr/> Contributor address; City; State; Zip Code Panorama Village, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Jane <hr/> Contributor address; City; State; Zip Code Panorama Village, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Jane <hr/> Contributor address; City; State; Zip Code Panorama Village, TX 77304	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/44 Rpt: 48/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winslet, Linda	7 Amount of Contribution (\$) \$19.00
6 Contributor address; City; State; Zip Code Conroe, TX 77301		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jay	Amount of Contribution (\$) \$19.00
Contributor address; City; State; Zip Code Conroe, TX 77302		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jay	Amount of Contribution (\$) \$49.50
Contributor address; City; State; Zip Code Conroe, TX 77302		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jay	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Conroe, TX 77302		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jay	Amount of Contribution (\$) \$38.00
Contributor address; City; State; Zip Code Conroe, TX 77302		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 49/60
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/11 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 08/25/2023	5 Payee name Backen, Carolyn	
6 Amount (\$) 203.87 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 109 Panorama Drive Panorama Village, TX 77304	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) Reimbursement for Books for school donation
Date 10/26/2023	Payee name Belin, Charlotte	
Amount (\$) 155.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 40 Cherry Hill Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Reimbursement for Candy for Trick or Treat event
Date 12/15/2023	Payee name Brown, Portia	
Amount (\$) 16.56 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13982 East F.M. 1097 Road Willis, TX 77378-4348	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office/ Admin Fees	(b) Description (See instructions regarding type of information required.) Faxing and checks
Date 07/14/2023	Payee name Castro, Hazel	
Amount (\$) 100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3300 N. Loop 336 W. Apt. 725 CONROE, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Salaries/Wages/Contract Labor	(b) Description (See instructions regarding type of information required.) Typing services

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/11 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/14/2023	5 Payee name Covelli, Kaitlin	
6 Amount (\$) 1,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 200 Fountains Lane Apt. 6304 Conroe, TX 77304	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) Scholarship Award
Date 09/21/2023	Payee name Hataway, Caroline McWilliams	
Amount (\$) 350.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 10301 Autumn Lane Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Reimbursement for Banner deposit
Date 09/21/2023	Payee name Minuteman Press	
Amount (\$) 427.84 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1201 N. Loop 336 W. Conroe, TX 77301	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Banner
Date 09/14/2023	Payee name Panorama Golf Club	
Amount (\$) 1,496.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 73 Greenbriar Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Monthly Meeting

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/11 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/12/2023	5 Payee name Panorama Golf Club	
6 Amount (\$) 902.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 73 Greenbriar Conroe, TX 77304	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Monthly Meeting
Date 11/09/2023	Payee name Panorama Golf Club	
Amount (\$) 920.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 73 Greenbriar Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Monthly Meeting
Date 12/16/2023	Payee name Panorama Golf Club	
Amount (\$) 1,342.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 73 Greenbriar Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Monthly Meeting
Date 08/24/2023	Payee name Pay Pal	
Amount (\$) 4.12 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2211 N FIRST STREET SAN JOSE , CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Credit Card Services

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 4/11 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/18/2023	5 Payee name Pay Pal	
6 Amount (\$) 56.94 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 2211 N FIRST STREET SAN JOSE , CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Credit Card Services
Date 10/13/2023	Payee name Pay Pal	
Amount (\$) 41.78 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2211 N FIRST STREET SAN JOSE , CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Credit Card Services
Date 11/09/2023	Payee name Pay Pal	
Amount (\$) 39.23 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2211 N FIRST STREET SAN JOSE , CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Credit Card Services
Date 12/26/2023	Payee name Pay Pal	
Amount (\$) 44.51 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2211 N FIRST STREET SAN JOSE , CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Credit Card Services

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 5/11 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/14/2023	5 Payee name Persinger, Jennifer	
6 Amount (\$) 1,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 4257 Waukegan Road Conroe, TX 77306	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) Scholarship Award
Date 07/03/2023	Payee name ProMerchant, LLC	
Amount (\$) 33.92 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 501 Boylston Street Boston, MA 02116	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Credit Card Processing Services
Date 08/01/2023	Payee name ProMerchant, LLC	
Amount (\$) 33.92 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 501 Boylston Street Boston, MA 02116	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Credit Card Processing Services
Date 09/01/2023	Payee name ProMerchant, LLC	
Amount (\$) 57.99 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 501 Boylston Street Boston, MA 02116	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Credit Card Processing Services

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 6/11 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/03/2023	5 Payee name ProMerchant, LLC	
6 Amount (\$) 49.97 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 501 Boylston Street Boston, MA 02116	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Credit Card Processing Services
Date 11/01/2023	Payee name ProMerchant, LLC	
Amount (\$) 49.63 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 501 Boylston Street Boston, MA 02116	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Credit Card Processing Services
Date 12/01/2023	Payee name ProMerchant, LLC	
Amount (\$) 54.40 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 501 Boylston Street Boston, MA 02116	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Credit Card Processing Services
Date 12/14/2023	Payee name Storseth, Brenda	
Amount (\$) 300.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2146 Summit Mist Drive Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Musician

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 7/11 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 08/18/2023	5 Payee name Table at Madeley	
6 Amount (\$) 234.85 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 316 Madeley Conroe, TX 77301	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Membership Event
Date 07/25/2023	Payee name Texas Comptroller of Public Accounts	
Amount (\$) 57.63 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip P.O. Box 13528 Austin, TX 78711	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Sales Tax on Merchandise
Date 07/25/2023	Payee name Texas Comptroller of Public Accounts	
Amount (\$) 82.83 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip P.O. Box 13528 Austin, TX 78711	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Sales Tax on Merchandise
Date 09/21/2023	Payee name Texas Comptroller of Public Accounts	
Amount (\$) 6.22 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip P.O. Box 13528 Austin, TX 78711	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Sales Tax on Merchandise

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 8/11 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/27/2023	5 Payee name Texas Comptroller of Public Accounts	
6 Amount (\$) 11.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip P.O. Box 13528 Austin, TX 78711	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Sales Tax on Merchandise
Date 07/07/2023	Payee name Texas Federation of Republican Women	
Amount (\$) 25.30 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 N. Hwy 183, Ste. J4 Austin, TX 78750-1832	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Membership Dues
Date 09/07/2023	Payee name Texas Federation of Republican Women	
Amount (\$) 25.30 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 N. Hwy 183, Ste. J4 Austin, TX 78750-1832	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Membership Dues
Date 11/04/2023	Payee name Texas Federation of Republican Women	
Amount (\$) 880.40 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 N. Hwy 183, Ste. J4 Austin, TX 78750-1832	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Membership Dues

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 9/11 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/17/2023	5 Payee name Texas Federation of Republican Women	
6 Amount (\$) 202.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 13740 N. Hwy 183, Ste. J4 Austin, TX 78750-1832	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Membership Dues
Date 12/20/2023	Payee name Texas Federation of Republican Women	
Amount (\$) 278.30 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 N. Hwy 183, Ste. J4 Austin, TX 78750-1832	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Membership Dues
Date 09/28/2023	Payee name Wagers, Mary	
Amount (\$) 98.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3915 W Davis # 130-131 Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Name Badge purchase	(b) Description (See instructions regarding type of information required.) Reimbursement for purchase of name badge order
Date 10/26/2023	Payee name Whitestone Printing	
Amount (\$) 704.36 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO BOX 2585 CONROE, TX 77305	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Liberty Belles Merchandise	(b) Description (See instructions regarding type of information required.) Merchandise for re-sale

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 10/11 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 07/14/2023	5 Payee name Williamson, Jane	
6 Amount (\$) 191.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 47 Cherry Hill Drive Panorama Village, TX 77304	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Reimbursement for membership event
Date 11/25/2023	Payee name Williamson, Jane	
Amount (\$) 23.91 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 47 Cherry Hill Drive Panorama Village, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Printing Expense	(b) Description (See instructions regarding type of information required.) Reimbursement for printing of labels
Date 11/29/2023	Payee name Williamson, Jane	
Amount (\$) 29.95 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 47 Cherry Hill Drive Panorama Village, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Reimbursement for email service upgrade
Date 10/03/2023	Payee name Wix.com, Inc	
Amount (\$) 26.90 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 6701 Harwin Drive Ste. 105 Houston, TX 77036	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Website

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 11/11 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/23/2023	5 Payee name Wix.com, Inc	
6 Amount (\$) 64.95 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 6701 Harwin Drive Ste. 105 Houston, TX 77036	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Website