FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00080382 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Strong Republican Women Date Received **ELECTRONICALLY FILED** 01/31/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** PO Box 543 Change of Address Argyle, TX 76226-0543 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Frederick C. NAME Date Processed **NICKNAME** LAST **SUFFIX** Date Imaged Tate CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 959 W Glade Rd STREET **ADDRESS** (Residence or Business) Hurst, TX 76054 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** PO Box 953 MAILING **ADDRESS** Change of Address Colleyville, TX 76034 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (469) 290-7500 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 12/26/2023 01/25/2024

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME	nn Woman			13 Filer		(Ethics Commission Filers)
Texas Strong Republica	an women			0000	30382	
4 COMMITTEE	1. Candidates	A. Supported				
ACTIVITY	(Identify by name or, if applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures	A. Supported				
	(Describe by date and location of election and nature of issue.)	"				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if					
	applicable, classify by party.)					
5 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	OR GUARANTEE MADE ELECTRON	ICALLY)	N	\$	0.00
	2. TOTAL POLITICA	AL CONTRIBUTI		5)	\$	646.47
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXP	ENDITURES	<u>, </u>	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITUR	RES		\$	2,293.68
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN		MAINTAINED AS OF THE LA	AST DAY	\$	26,877.34
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE		OUTSTANDING LOANS AS	OF THE	\$	0.00
6 AFFIDAVIT	I					
		true	vear, or affirm, under penalty of eand correct and includes all if er Title 15, Election Code.	of perjury, the information r	at the ac equired	ecompanying report is to be reported by me
			Fron	derick C. Ta	nto.	
				of Campaign		or.
			Signature o	if Campaign	reasur	er
AFFIX NOTARY	STAMP / SEAL ABOVE					
Sworn to and subscribed	before me, by the said			, this the _		day
of				_		
Signature of officer ad	ministering oath	Printed name of o	fficer administering oath	Title	of office	er administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

					3 of 10	
		EE NAME ong Republican Women	18 Filer ID 00080382	(Ethic	es Commission Filers)	
19 SCI	19 SCHEDULE SUBTOTALS					
IAN	ME OF S	SCHEDULE		<u> </u>	SUBTOTAL AMOUNT	
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	520.00	
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	126.47	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$		
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$		
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$		
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$		
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR O	DRGANIZATION	\$		
9.		SCHEDULE E: LOANS		\$		
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	2,293.68	
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$		
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/10		
2	FILER NAME Texas Strong	g Republican Women			3	Filer ID (Ethics Commission 00080382	n Filers)
4	Date 12/26/2023	 5 Full name of contributor address; City; State; Z)	7	Amount of Contribution (\$)	\$100.00
8	Principal occu County Com	Denton, TX 76207 pation / Job title (See Instructions) missioner		Employer (See Instructions Denton County)		
	Date 01/13/2024	Full name of contributor of contributor of contributor of contributor of contributor address; City; State; Z	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
	Date 01/13/2024	Full name of contributor	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu	Plower Mound, TX 75028 pation / Job title (See Instructions)		Employer (See Instructions Denton County Pct. 4)		
	Date 01/10/2024	Full name of contributor of Mason, Kellie Contributor address; City; State; Z	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$15.00
Sanger, TX 76266 Principal occupation / Job title (See Instructions) CFO Employer (See Instruction Rock on Framing Inc)					
	Date 01/24/2024	Full name of contributor of contributor of contributor of contributor of contributor of contributor address; City; State; Zity; Denton, TX 76207	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$175.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
			<u>.</u>				

	MONETARY POLITICAL CON	ITRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to co	1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/10	
2	FILER NAME Texas Strong Republican Women		3 Filer ID (Ethics Commission Filers) 00080382
4	Date 5 Full name of contributor ou ou 01/10/2024 Wiginton, Laurie	p Code	7 Amount of Contribution (\$) \$15.00
8	Denton, TX 76207 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions	s)
	Retired Date Full name of contributor ou ou ou Zilinsky, Peggy Contributor address; City; State; Zi	Retired ut-of-state PAC (ID#:) p Code	Amount of Contribution (\$) \$175.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions Retired	s)

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 6/10 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Texas Strong Republican Women 00080382 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 01/05/2024 Tate, Fred \$126.47 Campaign Bookkeeping 7 Contributor address; City; State; Zip Code Services and Support Colleyville, TX 76034 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) CFO Shield LLC Managing Director 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/4 Rpt: 7/10	Texas Strong Republican Women	00080382
4 Date	5 Payee name	-
01/10/2024	Anedot Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$0.90	1381 Poydras Street, Suite 1770	
Expenditure from corporate funds	New Orleans, LA 70153	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Online Donation Processing Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	l ght Office held
expenditure to benefit C/OI		giii.
Date	Para marra	
01/10/2024	Payee name Anedot Inc	
Amount (\$)	Payee address; City; State; Zip Co	de
\$0.90	1381 Poydras Street, Suite 1770	
Expenditure from corporate funds	New Orleans, LA 70153	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	1 000	Check if Austin, TX, officeholder living expense
		Online Donation Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
experialitie to benefit C/Oi	1	
Date	Payee name	
12/26/2023	Constant Contact	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$24.53	PO Box 171146	
Expenditure from corporate funds	Austin, TX 78717	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	3 Pr	Check if Austin, TX, officeholder living expense
		Email Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
experialitie to beliefft C/OI		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/4 Rpt: 8/10	Texas Strong Republican Women 00080382
4 Date	5 Payee name
01/10/2024	Denton County Republican Lincoln Cabinet
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,400.00	PO Box 50748
Expenditure from	
corporate funds	Denton, TX 76206
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Sponsorship of Table at Event
	Sponsorship of Table at Event
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
01/03/2024	Denton Trophy House
Amount (\$)	Payee address; City; State; Zip Code
\$35.72	201 S Elm Street
Ψ03.72	201 3 Ellii Succi
Expenditure from corporate funds	Denton, TX 76201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Name Tags
	Name rags
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
01/01/2024	Google LLC
Amount (\$)	<u> </u>
\$6.40	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy
φ0.40	1000 Amphilineane Pkwy
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Google G-Suite Subscription
	Google G-Suite Subscription
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commiss	sion Filers)
Sch: 3/4 Rpt: 9/10	Texas Strong Republican Women 00080382	
4 Date	5 Payee name	
01/05/2024	Gringolet LLC	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$213.50	7701 Rialto Blvd Apt 612	
Expenditure from corporate funds	Austin, TX 78735	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	ViciMedia/Website Hosting	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
<u> </u>		
Date	Payee name	
01/22/2024	Office Depot	
Amount (\$)	Payee address; City; State; Zip Code	
\$77.59	2300 San Jacinto Blvd, San Jacinto Plaza	
Expenditure from		
corporate funds	Denton, TX 76205	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	
	Check if Austin, TX, officeholder living expense Club Office Supplies	
	Cido Cinec Supplies	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
Date	Payee name	
01/03/2024	Printify, Inc.	
Amount (\$)	· ·	
\$71.84		
Ψ/1.04	100 West 15th Street	
Expenditure from	Wilmington, DE 19801	
corporate funds		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Member Birthday Cards	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	JH	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/4 Rpt: 10/10	Texas Strong Republican Women 00080382
4 Date	5 Payee name
01/06/2024	ShoutSocial.com
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6.00	1 E Center Street, Suite 300
Expenditure from corporate funds	Provo, UT 84606
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Advertising Expense
	Advertising Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/01/2024	TFRW
Amount (\$)	Payee address; City; State; Zip Code
\$304.50	PO Box 171146
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Expenditure from corporate funds	Austin, TX 78717
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Membership Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
	Payee name
01/10/2024	TFRW
Amount (\$)	Payee address; City; State; Zip Code
\$151.80	PO Box 171146
Expenditure from corporate funds	Austin, TX 78717
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Membership Donation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	•