#### 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) 00088607 3 COMMITTEE NAME **OFFICE USE ONLY** Red Stiletto Republican Women Date Received **ELECTRONICALLY FILED** 07/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 120 Seth Raynor Drive Change of Address New Braunfels, TX 78130 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Ms. Minerva NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Cuvillier CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 5885 Barbarossa Road STREET **ADDRESS** (Residence or Business) Seguin, TX 78155 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 5885 Barbarossa Road MAILING **ADDRESS** Change of Address Seguin, TX 78155 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (830) 556-9200 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 X 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** 05/26/2024 06/25/2024

### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

## FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Red Stiletto Republican Women 0008			00088607	7
14 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 Moscures	A. Supported		
	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	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA		\$	155.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	113.77
CONTRIBUTION BALANCE	l .	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		0.00
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT	l		<u> </u>	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.	rjury, that the nation require	accompanying report is ed to be reported by me
		Ms. Miner	va Cuvillier	
	Signature of Campaig			
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ed before me, by the said _	, th	is 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 off	icer administering oath

### **SUBTOTALS - MPAC**

# FORM MPAC COVER SHEET PG 3

				3 of 5
17 COMMITT	EE NAME	18 Filer ID	(Ethics Com	mission Filers)
Red Stile	tto Republican Women	00088607		
19 SCHEDUL NAME OF	SUBTO	TAL AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	155.00
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS			
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			
6.	6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION			
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	·	\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			
9.	SCHEDULE E: LOANS		\$	
10. X	10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	113.77
11.	11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	2. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		\$	
13.	13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/5
2	FILER NAME Red Stiletto Republican Women	3 Filer ID (Ethics Commission Filers) 00088607
4	Date 06/11/2024  5 Full name of contributor out-of-state PAC (ID#:  Berger, Tamara  6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$55.00
_	Seguin, TX 78155	
8	Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  Spiritual Care  Benevolent Care	
	Date Full name of contributor out-of-state PAC (ID#:	
	New Braunfels, TX 78132  Principal occupation / Job title (See Instructions)  Marketing  Employer (See Instructions)	ructions)

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District - Gift/Awards/Memorials Expense Printing Expense Travel Out of District - Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:			
Sch: 1/1 Rpt: 5/5	Red Stiletto Republican Women 00088607		
4 Date	5 Payee name		
06/15/2024	Krohn, Christie (Mrs.)		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$113.77	230 Turkey Tree Trail		
X Expenditure from corporate funds	Seguin, TX 78155		
8 PURPOSE	CF (See Categories listed at the top of this schedule)		
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.		
Check if Austin, TX, officeholder living expense  Reimburse business cards expens			
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held		