

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) 00066771	2 Total pages filed: 13
3 COMMITTEE NAME Republican State Leadership Committee PAC and Individual Account		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/12/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1201 F St. N.W., Ste. 675 Washington, DC 20004	Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Cabell		
	NICKNAME LAST SUFFIX Hobbs		
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1201 F St. N.W., Ste. 675 Washington, DC 20004		
	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1201 F St. N.W., Ste. 675 Washington, DC 20004		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1201 F St. N.W., Ste. 675 Washington, DC 20004		
	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1201 F St. N.W., Ste. 675 Washington, DC 20004		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (202) 448-5160		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)		
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year 01/01/2024	THROUGH	Month Day Year 06/30/2024
11 ELECTION	ELECTION DATE Month Day Year 11/05/2024	ELECTION TYPE	
		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Republican State Leadership Committee PAC and Individual Account	13 Filer ID (Ethics Commission Filers) 00066771
--	---

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 Janie Lopez State Representative
		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)	\$ 3,122,150.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 700,187.50
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,913,549.50
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.

Mr. Cabell Hobbs

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 Republican State Leadership Committee PAC and Individual Account		18 Filer ID (Ethics Commission Filers) 00066771
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,122,150.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 700,187.50
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/9 Rpt: 4/13
2 FILER NAME Republican State Leadership Committee PAC and Individual Account		3 Filer ID (Ethics Commission Filers) 00066771
4 Date 01/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Asher, Robert <hr/> 6 Contributor address; City; State; Zip Code Gwynedd Valley, PA 19437	7 Amount of Contribution (\$) \$50,000.00
8 Principal occupation / Job title (See Instructions) Confectioner		9 Employer (See Instructions) Asher's Chocolate
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Lisa <hr/> Contributor address; City; State; Zip Code Devon, PA 19333	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Travel Specialist		Employer (See Instructions) Lisa Bell Travel
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bencardino III, Lou <hr/> Contributor address; City; State; Zip Code Washington Crossing, PA 18977	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Bencardino Excavating
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brink, Alan <hr/> Contributor address; City; State; Zip Code Spring City, PA 19475	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Spring City Electrical MFG
Date 05/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cameron, Ronald <hr/> Contributor address; City; State; Zip Code Little Rock, AR 72212	Amount of Contribution (\$) \$50,000.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Mountaire Corporation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/9 Rpt: 5/13
2 FILER NAME Republican State Leadership Committee PAC and Individual Account		3 Filer ID (Ethics Commission Filers) 00066771
4 Date 06/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Downingtown, PA 19335	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corle, Jonathan <hr/> Contributor address; City; State; Zip Code Chester Springs, PA 19425	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft, III, Joe <hr/> Contributor address; City; State; Zip Code Tulsa, OK 74119	Amount of Contribution (\$) \$250,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Alliance Resource Partners
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dandrea, Franco <hr/> Contributor address; City; State; Zip Code Horsham, PA 19044	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Forrest Grove
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeBenedictis, Nicholas <hr/> Contributor address; City; State; Zip Code Ardmore, PA 19003	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/9 Rpt: 6/13
2 FILER NAME Republican State Leadership Committee PAC and Individual Account		3 Filer ID (Ethics Commission Filers) 00066771
4 Date 03/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVos, Daniel <hr/> 6 Contributor address; City; State; Zip Code Grand Rapids, MI 49503	7 Amount of Contribution (\$) \$250,000.00
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) RDV Corporation
Date 03/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVos, Douglas <hr/> Contributor address; City; State; Zip Code Grand Rapids, MI 49503	Amount of Contribution (\$) \$250,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Amway
Date 03/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVos, Suzanne <hr/> Contributor address; City; State; Zip Code Grand Rapids, MI 49503	Amount of Contribution (\$) \$250,000.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) RDV Corporation
Date 03/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVos Jr., Richard <hr/> Contributor address; City; State; Zip Code Grand Rapids, MI 49503	Amount of Contribution (\$) \$250,000.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) RDV Corporation
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derisi Jr., Robert <hr/> Contributor address; City; State; Zip Code Washington Crossing, PA 18977	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/9 Rpt: 7/13
2 FILER NAME Republican State Leadership Committee PAC and Individual Account		3 Filer ID (Ethics Commission Filers) 00066771
4 Date 01/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giller, Samuel <hr/> 6 Contributor address; City; State; Zip Code Alexandria, VA 22306	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Information Requested		9 Employer (See Instructions) Ryvall
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hennessey, Carol <hr/> Contributor address; City; State; Zip Code Pottstown, PA 19465	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Information requested		Employer (See Instructions) Information requested
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herb, Gregory <hr/> Contributor address; City; State; Zip Code Gilbertsville, PA 19525	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) Herb Real Estate
Date 04/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huizenga, J.C. <hr/> Contributor address; City; State; Zip Code Grand Rapids, MI 49512	Amount of Contribution (\$) \$850,000.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Huizenga Group
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurni, Gretchen <hr/> Contributor address; City; State; Zip Code North Wales, PA 19454	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/9 Rpt: 8/13
2 FILER NAME Republican State Leadership Committee PAC and Individual Account		3 Filer ID (Ethics Commission Filers) 00066771
4 Date 06/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ippolito, Joseph <hr/> 6 Contributor address; City; State; Zip Code Plymouth Meeting, PA 19462	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Information requested		9 Employer (See Instructions) Information requested
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kevin <hr/> Contributor address; City; State; Zip Code Phoenixville, PA 19460	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Traffic Planning & Design Inc
Date 03/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keiser, Belinda <hr/> Contributor address; City; State; Zip Code Parkland, FL 33067	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Vice Chairman of Community Relations		Employer (See Instructions) Southeastern College
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kindler, Frank <hr/> Contributor address; City; State; Zip Code Camp Hill, PA 17011	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehman, John <hr/> Contributor address; City; State; Zip Code Newtown, PA 18940	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) J.F. Lehman & Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/9 Rpt: 9/13
2 FILER NAME Republican State Leadership Committee PAC and Individual Account		3 Filer ID (Ethics Commission Filers) 00066771
4 Date 04/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loeffler, Kelly <hr/> 6 Contributor address; City; State; Zip Code Atlanta, GA 30305	7 Amount of Contribution (\$) \$50,000.00
8 Principal occupation / Job title (See Instructions) Chairman		9 Employer (See Instructions) Greater Georgia
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Charles <hr/> Contributor address; City; State; Zip Code Bryn Mawr, PA 19010	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCalister, William <hr/> Contributor address; City; State; Zip Code Langhorne, PA 19047	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Top Dog Direct
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCloskey, Daniel <hr/> Contributor address; City; State; Zip Code Newtown, PA 18940	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) ReMax
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McErlane, James <hr/> Contributor address; City; State; Zip Code West Chester, PA 19381	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Lamb McErlane P.C.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/9 Rpt: 10/13
2 FILER NAME Republican State Leadership Committee PAC and Individual Account		3 Filer ID (Ethics Commission Filers) 00066771
4 Date 06/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Ranney	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Chester Springs, PA 19425	
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Ranney Moran Inc
Date 03/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moroun, Matthew	Amount of Contribution (\$) \$100,000.00
	Contributor address; City; State; Zip Code Warren, MI 48089	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Central Transport International
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muller Jr., Paul	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code Newtown, PA 18940	
Principal occupation / Job title (See Instructions) Owner/President		Employer (See Instructions) Team Toyota Car Dealerships
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Natale, James	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code New Hope, PA 18938	
Principal occupation / Job title (See Instructions) Corporate Officer/Principal		Employer (See Instructions) C.R. BARD
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peck, Brandon	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Washington, DC 20005	
Principal occupation / Job title (See Instructions) Senior Vice-President		Employer (See Instructions) Flywheel Government Solutions

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/9 Rpt: 11/13
2 FILER NAME Republican State Leadership Committee PAC and Individual Account		3 Filer ID (Ethics Commission Filers) 00066771
4 Date 05/02/2024	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00808311) RSLC Victory Fund <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20004	7 Amount of Contribution (\$) \$700,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riviezzo, Albert <hr/> Contributor address; City; State; Zip Code Downingtown, PA 19335	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Information requested		Employer (See Instructions) Information requested
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schurman, Matthew <hr/> Contributor address; City; State; Zip Code Richboro, PA 18954	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) NewForge Technologies
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiller, Gary <hr/> Contributor address; City; State; Zip Code North Wales, PA 19454	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Joseph <hr/> Contributor address; City; State; Zip Code Newtown, PA 18940	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Thomas Edison Electric, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/9 Rpt: 12/13
2 FILER NAME Republican State Leadership Committee PAC and Individual Account		3 Filer ID (Ethics Commission Filers) 00066771
4 Date 03/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiik, Douglas <hr/> 6 Contributor address; City; State; Zip Code Upper Holland, PA 19053	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Breezy Point Day School and Camp
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yellin, Ronald <hr/> Contributor address; City; State; Zip Code Boca Raton, FL 33487	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zahirnyi, Marc <hr/> Contributor address; City; State; Zip Code Newtown, PA 18940	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) The Goddard School

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 13/13	2 FILER NAME Republican State Leadership Committee PAC and Individual	3 Filer ID (Ethics Commission Filers) 00066771
--	---	--

4 Date 06/30/2024	5 Payee name Expenditures Not Related to Texas
-----------------------------	--

6 Amount (\$) \$700,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1201 F St NW Ste. 675 Washington, DC 20004
---	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Expenditures Not Related to Texas	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Expenditures Not Related to Texas
---------------------------------	--	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 06/12/2024	Payee name Republican State Leadership Committee
--------------------	---

Amount (\$) \$187.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1201 F Street, NW Ste. 675 Washington, DC 20004
--	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Writing of Op-Ed	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Writing of Op-Ed; In-kind to Janie Lopez Campaign
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--