#### 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) 00017039 3 COMMITTEE NAME **OFFICE USE ONLY** Concho Valley Republican Women's Club PAC Date Received **ELECTRONICALLY FILED** 07/08/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 60583 Change of Address San Angelo, TX 76906 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mrs. Teri NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Jackson CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1515 Grierson Street STREET **ADDRESS** (Residence or Business) San Angelo, TX 76901 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 1515 Grierson Street MAILING **ADDRESS** Change of Address San Angelo, TX 76901 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (325) 656-0121 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

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### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME		_		13 Filer ID	(Ethics Commission Filers)
Concho Valley Republic	can Women's Club PAC	C		0001703	39 
4 COMMITTEE ACTIVITY	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			
		A Commented			
	Measures     (Describe by date and location	A. Supported			
	of election and nature of issue.)				
		B. Opposed			
	3. Officeholders				
	Assisted (Identify by name or, if applicable, classify by party.)				
L5 CONTRIBUTION	1 TOTAL LINITEMIZE	D POLITICAL CONTI	RIBUTIONS (OTHER THAN		
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	OR GUARANTEES  MADE ELECTRONIC, t qualifies for the higher	OF LOANS, OR ALLY)	\$	0.00
	2. TOTAL POLITICA			\$	
	(OTHER THAN PLEI	DGES, LOANS, OR	GUARANTEES OF LOANS)		314.17
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$	0.00	
	4. TOTAL POLITICA	AL EXPENDITURE	S	\$	1,031.66
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		DAY \$	12,055.20	
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL O	UTSTANDING LOANS AS OF	THE \$	0.00
L6 AFFIDAVIT	1			<u> </u>	
		true a	ar, or affirm, under penalty of pe nd correct and includes all infor Title 15, Election Code.	erjury, that the mation requir	e accompanying report is red to be reported by me
			Mrs Te	ri Jackson	
			Signature of Ca		surer
AFFIX NOTARY	STAMP / SEAL ABOVE				
	hafana na haraba asid			latia dia a	de.
	_, 20, to certify \		, t	nis the	day
<u> </u>	_, 20, to certify (	willers, withess my na	and and Seal of Office.		
Signature of officer ad	ministering oath	Printed name of office	cer administering oath	Title of o	fficer administering oath

### **SUBTOTALS - MPAC**

## FORM MPAC COVER SHEET PG 3

			3 of 8				
17 COMMITTEE NAME  Concho Valley Republican Women's Club PAC		<b>18</b> Filer ID 00017039	(Ethics Commission Filers)				
19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE	SUBTOTAL AMOUNT						
SCHEDULE A1: MONETARY POLITICAL CONTRIBUT	<b>\$</b> 314.17						
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITIC	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS						
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$						
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM ORGANIZATION	\$						
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRI LABOR ORGANIZATION	\$						
6. SCHEDULE C3: MONETARY SUPPORT FROM CORF	\$						
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM O ORGANIZATION	CORPORATION OR LABOR		\$				
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM C	ORPORATION OR LABOR (	ORGANIZATION	\$				
9. SCHEDULE E: LOANS			\$				
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM F	POLITICAL CONTRIBUTIONS	5	<b>\$</b> 1,031.66				
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			\$				
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FRO	M POLITICAL CONTRIBUTIO	ONS	\$				
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT (	CARD		\$				
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM	M POLITICAL CONTRIBUTIO	DNS	\$				
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUND TO FILER	DS, AND CONTRIBUTIONS F	RETURNED	\$				

	MONET	ARY POLITICAL CONT		SCHEDULE A1		
	The Instru	ction Guide explains how to co	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/8		
2	FILER NAME Concho Valle	ey Republican Women's Club PAC	3	Filer ID (Ethics Commission 00017039	n Filers)	
4	Date 06/05/2024	Baldwin, Angela (Mrs.)				\$35.00
_	Deignigal	San Angelo, TX 76904	lo Granico	r (Coo Instructions)		
8	RN	pation / Job title (See Instructions)	9 Employe	r (See Instructions)		
	Date 06/25/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	Amount of Contribution (\$)	\$33.95		
	Principal occu	San Angelo, TX 76904 pation / Job title (See Instructions)	Employe	r (See Instructions)		
	Homemaker	,		,		
	Date 06/05/2024	Full name of contributor out-of-state PAC (ID#:)  Martin, Barbie (Mrs.)  Contributor address; City; State; Zip Code		)	Amount of Contribution (\$)	\$35.00
		San Angelo, TX 76904				
	Principal occu Retired	oation / Job title (See Instructions)	Employe	r (See Instructions)		
	Date 06/25/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:		Amount of Contribution (\$)	\$35.22
	Principal occu retired	oation / Job title (See Instructions)	Employe	r (See Instructions)		
	Date 06/05/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:		Amount of Contribution (\$)	\$105.00
	Principal occu Retired	pation / Job title (See Instructions)	Employe	r (See Instructions)		
			·			

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/8
2	FILER NAME Concho Valley Republican Women's Club PAC	3 Filer ID (Ethics Commission Filers) 00017039
4	Date 06/05/2024  5 Full name of contributor out-of-state PAC (ID#: Taylor, Debbie  6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$35.00
	San Angelo, TX 76904	
8	Principal occupation / Job title (See Instructions)  9 Employer  Housewife	(See Instructions)
	Date Full name of contributor out-of-state PAC (ID#:	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code	
	San Angelo, TX 76903	
	Principal occupation / Job title (See Instructions) Employer Estheticial	(See Instructions)

### 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		mmittee	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid			Expens Wages	se s/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 1/3 Rpt: 6/8		Concho Val	ley Republican W	omen's Cl	ub PAC	2			00017039	
4	Date	5	Payee name								
	06/20/2024		Constant Co	ontact							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode				
	\$24.52		Reservoir P	lace							
			1601 Trape	lo Road							
	Expenditure from corporate funds		Waltham, M	IA 02451							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	dule)	(b)	Description			
	OF EXPENDITURE			head/Rental Expe		,		Check if travel	outsi	de of Texas. Com	plete Schedule T.
	LAFLINDITORE							ш		officeholder living	g expense
								Monthly office	e te	e	
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder name	0	ffice sou	ught			Office he	eld
	Date		Payee name								
	06/24/2024		Martin, Lind	a (Mrs.)							
	Amount (\$)	┝	Payee addres	ss; City;	State:	Zip Co	nde				
	\$110.00		2650 Harva		Otato,	_,p	ouc				
	Ψ110.00		2000 1141 14	Id AVC							
$\vdash$	Expenditure from			_,,,							
느	corporate funds	L	San Angelo	, 1X 76904							
	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Event Expe	nse				ш			plete Schedule T.
	-							_		officeholder living	
								Reimburseme	eni	ioi iuncheo	n speakers gifts
_	Commission ONII V if disposi	L_	Canalidata/Offi			#:·	. aulas			Office he	- Lal
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH										
	·	_									
	Date		Payee name								
	06/14/2024		Papel Statio	onery							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode				
	\$248.98		2413 Sherw	ood Way							
	Expenditure from corporate funds		San Angelo	, TX 76904							
	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Event Expe		•	,		Check if travel	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITORE							_	, TX,	officeholder living	j expense
								invitations			
L											
	Complete ONLY if direct		Candidate/Offi	ceholder name	0	ffice sou	ught		_	Office he	eld
	expenditure to benefit C/OF	H									

### 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 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: 2/3 Rpt: 7/8	Concho Valley Republican Women's Club PAC 00017039						
4 Date	5 Payee name						
06/10/2024	TFRW (Texas Federation of Republican Women)						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$430.10	13740 N Hwy 183						
	Suite J4						
Expenditure from corporate funds	Austin, TX 78750-1832						
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						
	Membership fees						
	Wellibership tees						
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
06/10/2024	TFRW (Texas Federation of Republican Women)						
Amount (\$)	Payee address; City; State; Zip Code						
\$126.50	13740 N Hwy 183						
	Suite J4						
Expenditure from corporate funds	Austin, TX 78750-1832						
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  Membership fees						
	Wellibership tees						
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
06/20/2024	Texas State Comptroller						
Amount (\$)	Payee address; City; State; Zip Code						
\$52.00	P.O. Box 149355						
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Expenditure from corporate funds	Austin, TX 78714-9355						
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  Texas Sales Tax use fine						
	TEADS SAIES TAX USE IIITE						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·						

### 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 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
OTHER (on the a contense and listed above)

Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment		Printing Expense Salaries/Wages/Contract Labor ns how to complete this form.	Travel Out of District OTHER (enter a category not listed above)
4 7 1 0 1 1 5		<u>.</u>	[
1 Total pages Schedule F1: Sch: 3/3 Rpt: 8/8	Concho Valley Republican Women's	Club PAC	3 Filer ID (Ethics Commission Filers) 00017039
4 Date	5 Payee name		•
06/13/2024	Vonage		
6 Amount (\$)		te; Zip Code	
\$39.56		ic, Zip Couc	
- Evpanditura from			
Expenditure from corporate funds	Horndel, NJ 07733		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this		
EXPENDITURE	Office Overhead/Rental Expense		I outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Monthly offic	
		Working one	Je 100
9 Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/C	OH		