FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00054315 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Federation of Republican Women PAC Date Received **ELECTRONICALLY FILED** 10/04/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 13740 N. Hwy. 183, Ste. J4 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78750-1830 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Susan NAME NICKNAME LAST **SUFFIX** Friedrich STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 521 River Chase Boulevard STREET **ADDRESS** (Residence or Business) Georgetown, TX 78628 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 521 River Chase Boulevard MAILING **ADDRESS** Georgetown, TX 78628 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 517-2962 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) X **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2024 09/26/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

| 12 COMMITTEE NAME | | | 13 Filer ID | (Ethics Commission Filers) |
|---|---|--|----------------|----------------------------|
| Texas Federation of F | Republican Women PAC | | 00054315 | |
| 14 COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Republican | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | |
| | Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed | | |
| | | | | |
| | Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | |
| 15 CONTRIBUTION TOTALS | PLEDGES, LOANS, CONTRIBUTIONS M | O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold | \$ | 0.00 |
| | 2. TOTAL POLITICA (OTHER THAN PLE | L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 105,131.35 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED | POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICA | L EXPENDITURES | \$ | 133,269.98 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL (OF THE REPORTIN | CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD | DAY \$ | 654,727.29 |
| OUTSTANDING LOAN TOTALS | • | AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD | THE \$ | 0.00 |
| 16 AFFIDAVIT | <u> </u> | | <u> </u> | |
| | | I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code. | | |
| | | Susan F | =riedrich | |
| | | Signature of Car | npaign Treasur | rer |
| AFFIX NOTAF | RY STAMP / SEAL ABOVE | | | |
| Sworn to and subscribe | ed before me, by the said | , th | nis the | day |
| of | , 20, to certify v | which, witness my hand and seal of office. | | |
| | | | | |
| Signature of officer a | administering oath | Printed name of officer administering oath | Title of offic | er administering oath |

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

| | | | | | 3 of 188 |
|---------------|--------|--|--------------|-----------|-------------------|
| 17 CON | MMITTE | EE NAME | 18 Filer ID | (Ethics C | ommission Filers) |
| Tex | as Fed | deration of Republican Women PAC | 00054315 | | |
| | | E SUBTOTALS SCHEDULE | | SUE | STOTAL AMOUNT |
| 1. | Х | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ | 105,131.35 |
| 2. | | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | |
| 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 (| ORGANIZATION | \$ | |
| 9. | | SCHEDULE E: LOANS | | \$ | |
| 10. | Х | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION: | S | \$ | 102,664.94 |
| 11. | | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | |
| 12. | | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | ONS | \$ | |
| 13. | Х | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | 30,605.04 |
| 14. | | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | ONS | \$ | |
| 15. | Х | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER | RETURNED | \$ | 8,917.40 |
| | | | | • | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|---------------------------|--|--|----|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 1/114 Rpt: 4/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/21/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$25.30 |
| _ | <u> </u> | Abilene, TX 79602 | 2.5.1.(2.1.1.1) | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | ;) | | |
| | Date 08/02/2024 | Full name of contributor out-of-state PAC (ID#:_Abilene Republican Women's Club Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$101.20 |
| | Dringing agg | Abilene, TX 79602 | Employer (See Instructions | _ | | |
| | Pilicipai occu | pation / Job title (See Instructions) | Employer (See Instructions | ') | | |
| | Date 09/19/2024 | Full name of contributor out-of-state PAC (ID#:_Abilene Republican Women's Club Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$75.90 |
| | | Abilene, TX 79602 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | i) | | |
| | Date 07/10/2024 | Full name of contributor out-of-state PAC (ID#:_Abiog, Sam Contributor address; City; State; Zip Code Allen, TX 75013 | | | Amount of Contribution (\$) | \$328.90 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 09/20/2024 | Full name of contributor out-of-state PAC (ID#:_Akerly, Bruce Contributor address; City; State; Zip Code Coppell, TX 75019 | | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu owner | pation / Job title (See Instructions) | Employer (See Instructions Akerly Law PLLC | 5) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CO | ONTRIBUTION | S | | SCHEDUL | E A1 |
|---|--------------------------------|--|---------------------------------------|---|---|---|-------------|
| | The Instru | ction Guide explains how to | o complete this forn | n. | 1 | Total pages Schedule A1: Sch: 2/114 Rpt: 5/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAG | | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/20/2024 | 5 Full name of contributor Akerly, Shelly6 Contributor address; City; State | out-of-state PAC (ID#: e; Zip Code |) | 7 | Amount of Contribution (\$) | \$75.00 |
| _ | Deinsinal | Coppell, TX 75019 | lo lo | Faralas as (Cara la desartina | | | |
| 8 | manager | pation / Job title (See Instructions) | | Employer (See Instructions Akerly Law PLLC |) | | |
| | Date 07/09/2024 | Full name of contributor Alamo City RW Contributor address; City; State | out-of-state PAC (ID#: ; Zip Code |) | | Amount of Contribution (\$) | \$125.00 |
| | Principal occu | San Antonio, TX 78232-2702 pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | · | , , | | . , , | | | |
| | Date 09/05/2024 | Full name of contributor Alamo City RW PAC Contributor address; City; State | out-of-state PAC (ID#: e; Zip Code |) | | Amount of Contribution (\$) | \$775.00 |
| | | San Antonio, TX 78232 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 07/05/2024 | Full name of contributor Albert, Charlotte Contributor address; City; State Thrall, TX 76578 | out-of-state PAC (ID#: e; Zip Code | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 07/06/2024 | Full name of contributor Albert, Charlotte Contributor address; City; State Thrall, TX 76578 | out-of-state PAC (ID#: e; Zip Code |) | | Amount of Contribution (\$) | \$253.75 |
| | Principal occu Licensed Mir | pation / Job title (See Instructions) nister | | Employer (See Instructions |) | | |
| | | | <u>'</u> | | | | |

| | MONET | ARY POLITICAL (| CONTRIBUTIO | NS | | SCHEDULE | ■ A1 |
|---|----------------------------|--|-------------------------------------|--|----------------|---|-------------|
| | The Instru | ction Guide explains how | to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 3/114 Rpt: 6/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women F | PAC | | 3 | Filer ID (Ethics Commission 00054315 | ı Filers) |
| 4 | Date 08/02/2024 | 5 Full name of contributor Albert, Charlotte6 Contributor address; City; St | out-of-state PAC (ID#:ate; Zip Code | | 7 | Amount of Contribution (\$) | \$50.00 |
| | | Thrall, TX 76578 | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions |) | 9 Employer (See Instructions | s) | | |
| | Date 09/18/2024 | Full name of contributor Alley DeRudder, Lene Contributor address; City; St | |) | • | Amount of Contribution (\$) | \$75.00 |
| | Principal occu | Allen, TX 75013 pation / Job title (See Instructions |) | Employer (See Instructions | s) | | |
| | Attorney | (| , | Cowles & Thompson | , | | |
| | Date 08/29/2024 | Full name of contributor Alley DeRudder, Lene' Contributor address; City; St | out-of-state PAC (ID#: |) | • | Amount of Contribution (\$) | \$80.00 |
| | | Allen, TX 75013 | | | | | |
| | Principal occu Attorney | pation / Job title (See Instructions |) | Employer (See Instructions Cowles & Thompson | 5) | | |
| | Date 08/19/2024 | Full name of contributor Allick, Susan Contributor address; City; St San Antonio, TX 78233 | |) | • | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions |) | Employer (See Instructions | <u> </u> s) | | |
| | Date 09/26/2024 | Full name of contributor Alston, Kay Contributor address; City; St Thornton, TX 76687 | out-of-state PAC (ID#:ate; Zip Code |) | • | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions |) | Employer (See Instructions | 5) | | |
| | | | , | | | | |

| | MONEI | ARY POLITICAL (| CONTRIBUTIO | ONS | SCHEDUL | E A1 |
|---|--------------------------------|--|--|---|---|-----------|
| | The Instru | ction Guide explains how | to complete this fo | orm. | 1 Total pages Schedule A1: Sch: 4/114 Rpt: 7/188 | |
| 2 | FILER NAME | ation of Donaldian Manager |)AG | | 3 Filer ID (Ethics Commission | n Filers) |
| | | ation of Republican Women F | | | 00054315 | |
| 4 | Date 09/22/2024 | 5 Full name of contributor Amonett, Ashleigh6 Contributor address; City; St | out-of-state PAC (ID#:_ ate; Zip Code |) | 7 Amount of Contribution (\$) | \$95.00 |
| | | Odessa, TX 79762 | | | | |
| 8 | | pation / Job title (See Instructions | () | 9 Employer (See Instructions | | |
| | Assistant Ex | ecutive Director | | Odessa Housing Financ | ice Corporation | |
| | Date 09/06/2024 | Full name of contributor Anderson, Carol Ann Contributor address; City; S | |) | Amount of Contribution (\$) | \$12.00 |
| | | North Richland Hills, TX 7 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions |) | Employer (See Instructions | ns) | |
| | Date 08/26/2024 | Full name of contributor Anderson, Jeff Contributor address; City; S | out-of-state PAC (ID#:_ ate; Zip Code | | Amount of Contribution (\$) | \$160.00 |
| | | Leander, TX 78641 | | | | |
| | Principal occu | pation / Job title (See Instructions |) | Employer (See Instructions | ns) | |
| | Constable - I | Precinct 2 | | Williamson County | | |
| | Date 08/03/2024 | Full name of contributor Anderson, Rhonda Contributor address; City; S Longview, TX 75604 | out-of-state PAC (ID#:_ | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Govt Affairs | pation / Job title (See Instructions |) | Employer (See Instructions Charter Communication | | |
| | Date 08/09/2024 | Full name of contributor Andrews, Carol Contributor address; City; S San Antonio, TX 78256 | out-of-state PAC (ID#:_ ate; Zip Code | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions |) | Employer (See Instructions | ns) | |
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| | MONEI | ARY POLITICAL (| CONTRIBUTIO | ONS | | SCHEDUL | E A1 |
|---|--------------------------------|---|--|--|--------------------|---|-------------|
| | The Instru | ction Guide explains how | to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 5/114 Rpt: 8/188 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | ation of Republican Women F | PAC | | L | 00054315 | |
| 4 | Date 08/25/2024 | 5 Full name of contributor Antonick, Kristi6 Contributor address; City; St | out-of-state PAC (ID#:_ ate; Zip Code | | 7 | Amount of Contribution (\$) | \$80.00 |
| | | Overton, TX 75684 | | | | | |
| 8 | | pation / Job title (See Instructions | 5) | 9 Employer (See Instructions | s) | | |
| | Coalitions Di | | | AFP | _ | | |
| | Date 08/28/2024 | Full name of contributor Arrant, Debora Contributor address; City; St | out-of-state PAC (ID#:_ ate; Zip Code |) | | Amount of Contribution (\$) | \$160.00 |
| | Deinsinal case | PLANO, TX 75074 | A | Employer (Coo Instruction | | | |
| | Retired | pation / Job title (See Instructions | ;) | Employer (See Instructions | S) | | |
| | Date 07/04/2024 | Full name of contributor Ashton, Anna Contributor address; City; St | out-of-state PAC (ID#:_ ate; Zip Code | | | Amount of Contribution (\$) | \$75.00 |
| | | Taylor, TX 76574 | | | | | |
| | Principal occu | pation / Job title (See Instructions |) | Employer (See Instructions | 5) | | |
| | Realtor | | | Pure Realty | | | |
| | Date 08/10/2024 | Full name of contributor Atkins, L inda Contributor address; City; St | out-of-state PAC (ID#:_ ate; Zip Code |) | | Amount of Contribution (\$) | \$80.00 |
| | | TEMPLE, TX 76504 | | | | | |
| | Principal occu property mgt | pation / Job title (See Instructions | ·) | Employer (See Instructions self employed | s) | | |
| | Date 08/07/2024 | Full name of contributor Austin Republican Wome Contributor address; City; Si | | | | Amount of Contribution (\$) | \$177.10 |
| | | Austin, TX 78738 | aic, Zip Coue | | | | |
| | Principal occu | pation / Job title (See Instructions |) | Employer (See Instructions | . S) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|---------------------------|--|------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 6/114 Rpt: 9/188 | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/18/2024 | Full name of contributor out-of-state PAC (ID#:_ Austin Republican Women Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$227.70 |
| _ | | Austin, TX 78738 | | | | |
| 8 | Principal occu | ipation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 09/13/2024 | Full name of contributor out-of-state PAC (ID#:_Austin Republican Women Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$126.50 |
| | Principal occu | Austin, TX 78738 upation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/31/2024 | Full name of contributor out-of-state PAC (ID#:_Avery, Mary Jane Contributor address; City; State; Zip Code Marble Falls, TX 78654 | | | Amount of Contribution (\$) | \$240.00 |
| | Principal occu Retired | ppation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/09/2024 | Full name of contributor out-of-state PAC (ID#:_Avery, Mary Jane Contributor address; City; State; Zip Code Marble Falls, TX 78654 | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/23/2024 | Full name of contributor out-of-state PAC (ID#:_Bailey, Pamela Contributor address; City; State; Zip Code Georgetown, TX 78633 | | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIE | BUTION | NS | | SCHEDULE | ■ A1 | |
|---|-------------------------------|---|------------|----------------------------|----------|--|-------------|--|
| | The Instruc | ction Guide explains how to complet | e this for | m. | 1 | Total pages Schedule A1: Sch: 7/114 Rpt: 10/188 | | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | ı Filers) | |
| 4 | Date 07/17/2024 | Full name of contributor out-of-state R Barnett, Dawn Contributor address; City; State; Zip Code | |) | 7 | Amount of Contribution (\$) | \$25.30 | |
| 8 | Principal occu | Floresville, TX 78114 pation / Job title (See Instructions) | 9 | Employer (See Instructions | <u> </u> | | | |
| | Business Ow | | | , ., · (| , | | | |
| | Date 07/20/2024 | Full name of contributor out-of-state is Barnett, Dawn Contributor address; City; State; Zip Code | | | | Amount of Contribution (\$) | \$50.60 | |
| | | Floresville, TX 78114 | | | | | | |
| | Principal occu Business Ow | pation / Job title (See Instructions) vner | | Employer (See Instructions | 5) | | | |
| | Date 08/27/2024 | Full name of contributor out-of-state in Barnett, Dawn Contributor address; City; State; Zip Code | PAC (ID#: | | | Amount of Contribution (\$) | \$5.10 | |
| | | Floresville, TX 78114 | | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | <u>(</u> | | | |
| | Date 08/27/2024 | Full name of contributor out-of-state for Barnett, Dawn Contributor address; City; State; Zip Code Floresville, TX 78114 | - |) | | Amount of Contribution (\$) | \$20.20 | |
| | Principal occu Tax Assesso | pation / Job title (See Instructions) | | Employer (See Instructions | <u>(</u> | | | |
| | Date 08/30/2024 | Full name of contributor out-of-state in Barnett, Dawn Contributor address; City; State; Zip Code Floresville, TX 78114 | - |) | | Amount of Contribution (\$) | \$50.60 | |
| | Principal occu Tax Assesso | pation / Job title (See Instructions) r-Collector | | Employer (See Instructions | () | | | |
| | | | I | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTI | ONS | | SCHEDUL | E A1 |
|---|-----------------------------|---|---------------------------------|---------------|--|-------------|
| | The Instruc | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 8/114 Rpt: 11/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/10/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$25.30 |
| _ | Deignigal | Floresville, TX 78114 | O Frankrije (Coo krativations | | | |
| ð | Tax Assesso | pation / Job title (See Instructions) r-Collector | 9 Employer (See Instructions | 5) | | |
| | Date 08/12/2024 | Contributor address; City; State; Zip Code | #:) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu | San Angelo, TX 76904 pation / Job title (See Instructions) | Employer (See Instructions | - s) | | |
| | Retired | | | | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID: Batton, Judy Contributor address; City; State; Zip Code | #:) | • | Amount of Contribution (\$) | \$80.00 |
| | | Jacksonville, TX 75766 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID: Bay Area RW Contributor address; City; State; Zip Code Webster, TX 77598 | #:) | • | Amount of Contribution (\$) | \$175.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID: Berger, Becky Contributor address; City; State; Zip Code SCHULENBURG, TX 78956 | #:) | | Amount of Contribution (\$) | \$160.00 |
| | Principal occu Geologist | pation / Job title (See Instructions) | Employer (See Instructions Self | 5) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|---------------------------|--|------------------------------|---|--|-------------|
| | The Instruc | ction Guide explains how to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 9/114 Rpt: 12/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 07/27/2024 | Full name of contributor out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$80.00 |
| | | Tomball, TX 77375 | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID#: Bettger, Francine Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 |
| | Dringing age | San Marcos, TX 78666 | Employer (Coo Instructions | | | |
| | Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/09/2024 | Full name of contributor out-of-state PAC (ID#: Bexar County Republican Women Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$278.30 |
| | | San Antonio, TX 78216 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/14/2024 | Full name of contributor out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$151.80 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/08/2024 | Full name of contributor out-of-state PAC (ID#: Bexar County Republican Women Contributor address; City; State; Zip Code San Antonio, TX 78216 |) | | Amount of Contribution (\$) | \$75.90 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | I | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | NS | | SCHEDUL | E A1 |
|---|---------------------------|--|------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 10/114 Rpt: 13/188 | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/24/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$278.30 |
| _ | Deinsinal | San Antonio, TX 78216 | O Familia de Constantina | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 08/11/2024 | Full name of contributor out-of-state PAC (ID#:_ Birk, Carla Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 |
| | | Round Rock, TX 78681 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/09/2024 | Full name of contributor out-of-state PAC (ID#:_Birk, Carla Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$75.00 |
| | | Round Rock, TX 78681 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:_Blanco Co RW Contributor address; City; State; Zip Code Johnson Cuty, TX 78636 | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/18/2024 | Full name of contributor out-of-state PAC (ID#:_ Boatman, Vikki Contributor address; City; State; Zip Code Garrison, TX 75946 | | | Amount of Contribution (\$) | \$380.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ONETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE A1 | | | |
|---|-------------------------------|--|--|---|---|-----------|--|--|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 11/114 Rpt: 14/188 | | | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) | | |
| 4 | Date 08/29/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$160.00 | | |
| _ | | Leander, TX 78641 | | | | | | |
| 8 | Retired | ipation / Job title (See Instructions) | 9 Employer (See Instructions |) | | | | |
| | Date 08/07/2024 | Full name of contributor out-of-state PAC (ID#:_Bollin, Teresa Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 | | |
| | Principal occu | SAN ANTONIO, TX 78245 upation / Job title (See Instructions) | Employer (See Instructions | | | | | |
| | Retired | pation / 300 title (See instructions) | Employer (See Instructions | , | | | | |
| | Date 08/26/2024 | Full name of contributor out-of-state PAC (ID#:_ Bolton, Sarah Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$80.00 | | |
| | | Georgetown, TX 78633 | | | | | | |
| | Principal occu Insurance A | pation / Job title (See Instructions) gent | Employer (See Instructions) Self |) | | | | |
| | Date 08/30/2024 | Full name of contributor out-of-state PAC (ID#:_Borg, Joylene Contributor address; City; State; Zip Code New Braunfels, TX 77494 |) | | Amount of Contribution (\$) | \$80.00 | | |
| | Principal occu Business Ov | Ipation / Job title (See Instructions) | Employer (See Instructions Self-employed |) | | | | |
| | Date 09/16/2024 | Full name of contributor out-of-state PAC (ID#:_ Bosworth, Martha Contributor address; City; State; Zip Code League City, TX 77573 |) | | Amount of Contribution (\$) | \$95.00 | | |
| | Principal occu Retired | ipation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
| | | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|------------------------------|---|--|--------|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 12/114 Rpt: 15/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 07/27/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$160.00 |
| _ | Dringing Loggy | Kerrville, TX 78029 | O Employer (Coo Instructions | _ | | |
| 8 | Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 09/23/2024 | Full name of contributor | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu | Horseshoe Bay, TX 78657 pation / Job title (See Instructions) | Employer (See Instructions | ;) | | |
| | Retired | | | | | |
| | Date 09/23/2024 | Full name of contributor |) | | Amount of Contribution (\$) | \$285.00 |
| | | Katy, TX 77450 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 08/03/2024 | Full name of contributor out-of-state PAC (ID#:_Brannon, Michelle Contributor address; City; State; Zip Code Hallsville, TX 75650 | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Accountant | pation / Job title (See Instructions) | Employer (See Instructions PLSI | 5) | | |
| | Date 08/04/2024 | Full name of contributor out-of-state PAC (ID#:_Brannon, Michelle Contributor address; City; State; Zip Code Hallsville, TX 75650 | | | Amount of Contribution (\$) | \$253.75 |
| | Principal occu Consultant | pation / Job title (See Instructions) | Employer (See Instructions Brannon Consulting Ser | | es | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|---------------------------|---|--|---|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 13/114 Rpt: 16/188 | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/05/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Brazosport RW 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$25.00 |
| _ | | Freeport, TX 77541 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Brian Birdwell Campaign Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | Granbury, TX 76048 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/20/2024 | Full name of contributor out-of-state PAC (ID#:_ Brian Hughes Campaign Contributor address; City; State; Zip Code Mineola, TX 75773-0450 | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/09/2024 | Full name of contributor out-of-state PAC (ID#:_ Brotherton, Charla Contributor address; City; State; Zip Code Fort Worth, TX 76114 | | | Amount of Contribution (\$) | \$95.00 |
| | | pation / Job title (See Instructions) gency Owner | Employer (See Instructions Charla Brotherton Insura | | ce Agency LLC | |
| | Date 09/09/2024 | Full name of contributor out-of-state PAC (ID#:_ Brotherton, Charla Contributor address; City; State; Zip Code Fort Worth, TX 76114 | | | Amount of Contribution (\$) | \$75.00 |
| | | upation / Job title (See Instructions) gency Owner | Employer (See Instructions Charla Brotherton Insura | | e Agency LLC | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|---------------------------|---|------------------------------|---|---|-------------|
| | The Instruc | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 14/114 Rpt: 17/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/02/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$35.00 |
| | | Belton, TX 76513 | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 08/07/2024 | Full name of contributor out-of-state PAC (ID#:_Brown, Janet Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu | Belton, TX 76513 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Retired | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , ,, , | | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Brown, Janet Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$250.00 |
| | | Belton, TX 76513 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/09/2024 | Full name of contributor out-of-state PAC (ID#:_Brown, Janet Contributor address; City; State; Zip Code Belton, TX 76513 | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/25/2024 | Full name of contributor out-of-state PAC (ID#:_Burdine, Charlotte Contributor address; City; State; Zip Code San Antonio, TX 78260 | | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
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| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|---------------------------|--|------------------------------|------------|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 15/114 Rpt: 18/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/20/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$25.00 |
| 8 | Principal occu | Marble Falls, TX 78654 pation / Job title (See Instructions) | 9 Employer (See Instructions | i) | | |
| | • | | | | | |
| | Date 09/20/2024 | Full name of contributor out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$210.00 |
| | | Marble Falls, TX 78654 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | () | | |
| | Date 07/09/2024 | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$507.50 |
| | | Bertram, TX 78605 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | () | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | () | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | <u> </u> | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|---------------------------|---|------------------------------|---|---|-------------|
| | The Instruc | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 16/114 Rpt: 19/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/12/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$320.00 |
| | | Bonham, TX 75418 | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 08/31/2024 | Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | Bonham, TX 75418 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_Butler, Karen Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$380.00 |
| | - | Bonham, TX 75418 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/06/2024 | Full name of contributor out-of-state PAC (ID#:_ Byers, Amy Contributor address; City; State; Zip Code Conroe, TX 77304 | | | Amount of Contribution (\$) | \$160.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/06/2024 | Full name of contributor out-of-state PAC (ID#:_CLOUSER, Yvonne Contributor address; City; State; Zip Code Universal City, TX 78148 | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
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| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|----------------------------|---|-------------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 17/114 Rpt: 20/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/20/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$190.00 |
| • | Dringing oggu | Universal City, TX 78148 | D. Employer (See Instructions | | | |
| 8 | Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID#: COOKE COUNTY REPUBLICAN WOMEN Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$126.50 |
| | Principal occu | GAINESVILLE, TX 76240 pation / Job title (See Instructions) | Employer (See Instructions | | | |
| | i illicipai occa | pation, oob title (oce mandetons) | Employer (See mondeners | , | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID#: CTRW-PAC Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$227.70 |
| | | BELTON, TX 76513-7821 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID#:_Cabets, Kandice Contributor address; City; State; Zip Code montgomery, TX 77356 |) | | Amount of Contribution (\$) | \$320.00 |
| | Principal occu ea | pation / Job title (See Instructions) | Employer (See Instructions quadvest |) | | |
| | Date 07/03/2024 | Full name of contributor out-of-state PAC (ID#: Cain, Bergundi Contributor address; City; State; Zip Code Deer Park, TX 77536 | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu HOMEMAKE | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | ONS | | SCHEDULE | E A1 |
|---|--|---|-------------------------------------|---|---|-------------|
| | The Instruc | etion Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 18/114 Rpt: 21/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | ı Filers) |
| 4 | Date 09/09/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$75.00 |
| _ | Deinsinal assu | Deer Park, TX 77536 | O Familia var (Cara la atrustica pa | | | |
| 8 | HOMEMAKE | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 09/02/2024 | Full name of contributor out-of-state PAC (ID#:_ Cain, Bergundi Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$95.00 |
| | | Deer Park, TX 77536 | | | | |
| | Principal occu _l Homemaker | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/24/2024 | Full name of contributor out-of-state PAC (ID#:_ Calloway, Judy Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 |
| | | Odessa, TX 79761 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/12/2024 | Full name of contributor out-of-state PAC (ID#:_ Camino Real RW Contributor address; City; State; Zip Code San Antonio, TX 78248-1669 |) | | Amount of Contribution (\$) | \$150.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/27/2024 | Full name of contributor out-of-state PAC (ID#:_Canon, Judith Contributor address; City; State; Zip Code Midland, TX 79706 |) | | Amount of Contribution (\$) | \$50.60 |
| | Principal occu Retired | oation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONEI | ARY POLITICAL C | CONTRIBUTIO | ons | | SCHEDUL | E A1 |
|---|----------------------------------|--|--|---|-----------|---|-------------|
| | The Instru | ction Guide explains how | to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 19/114 Rpt: 22/188 | |
| 2 | FILER NAME Texas Feder | ration of Republican Women F | PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/20/2024 | Full name of contributor Cantrell, Alicia Contributor address; City; St | out-of-state PAC (ID#:_ | | 7 | Amount of Contribution (\$) | \$190.00 |
| | | Houston, TX 77019 | | | | | |
| 8 | Principal occu COO | pation / Job title (See Instructions |) | 9 Employer (See Instructions Coalition Por/For Texas | | | |
| | Date 09/20/2024 | Full name of contributor Canyon Lake RW Contributor address; City; St | out-of-state PAC (ID#:_ ate; Zip Code |) | | Amount of Contribution (\$) | \$350.00 |
| | Principal occu | Canyon Lake, TX 78133 pation / Job title (See Instructions |) | Employer (See Instructions | <u>s)</u> | | |
| | i inicipal occu | panon / oob tille (eee mandellone | , | Employer (See mandenoric | ٠, | | |
| | Date 09/01/2024 | Full name of contributor Capitol RW Contributor address; City; St | out-of-state PAC (ID#:_ ate; Zip Code |) | | Amount of Contribution (\$) | \$202.40 |
| | | Austin, TX 78729 | | | | | |
| | Principal occu | pation / Job title (See Instructions |) | Employer (See Instructions | 5) | | |
| | Date 07/16/2024 | Full name of contributor Carlson, Lea Contributor address; City; St Rockwall, TX 75087 | out-of-state PAC (ID#:_ |) | • | Amount of Contribution (\$) | \$80.00 |
| | Principal occu District Clerk | pation / Job title (See Instructions |) | Employer (See Instructions Rockwall County | 5) | | |
| | Date 09/12/2024 | Full name of contributor Carrillo, Cindy Contributor address; City; St Leander, TX 78641 | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Executive As | pation / Job title (See Instructions ssistant |) | Employer (See Instructions Supreme Court of Texa. | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | SCHEDULE A1 | | |
|---|---------------------------|---|------------------------------|-------------|---|------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 20/114 Rpt: 23/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | on Filers) |
| 4 | Date 09/23/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$95.00 |
| _ | | Coppell, TX 75019 | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 09/04/2024 | Full name of contributor out-of-state PAC (ID#:_ Carson, Paulette Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$95.00 |
| | | APPLE SPRINGS, TX 75926 | 5 1 (0 1 1 1 | | | |
| | Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/06/2024 | Full name of contributor out-of-state PAC (ID#:_ Cashion, Elaine Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$95.00 |
| | | Boerne, TX 78006 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#:_ Cashion, Elaine Contributor address; City; State; Zip Code Boerne, TX 78006 | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/28/2024 | Full name of contributor out-of-state PAC (ID#:_ Castillo, Patty Contributor address; City; State; Zip Code Woodway, TX 76712 |) | | Amount of Contribution (\$) | \$1,280.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTR | RIBUTION | IS | | SCHEDUL | E A1 |
|---|-------------------------------|---|-----------------|---------------------------------|----|---|-------------|
| | The Instru | ction Guide explains how to com | plete this for | m. | 1 | Total pages Schedule A1: Sch: 21/114 Rpt: 24/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/24/2024 | Full name of contributor out-of-s Castillo, Patty Contributor address; City; State; Zip Co | state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$75.00 |
| _ | | Woodway, TX 76712 | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 | Employer (See Instructions | 5) | | |
| | Date 09/17/2024 | Full name of contributor out-of-s Castillo, Patty Contributor address; City; State; Zip Co | | | | Amount of Contribution (\$) | \$95.00 |
| | Dringinal occu | Woodway, TX 76712 | - | Employer (See Instructions | | | |
| | Retired | pation / Job title (See Instructions) | | Employer (See Instructions | ') | | |
| | Date 07/16/2024 | Full name of contributor out-of-s Castloo, Janna Contributor address; City; State; Zip Co | state PAC (ID#: |) | | Amount of Contribution (\$) | \$160.00 |
| | | Mineola, TX 75773 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 09/26/2024 | Castloo, Janna | | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 09/26/2024 | Catlin, Lisa | state PAC (ID#: | | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Real Estate | oation / Job title (See Instructions) Broker | | Employer (See Instructions Self | i) | | |
| | | | 1 | | | | |

| | MONET | NETARY POLITICAL CONTRIBUTIONS | | | | SCHEDULE A1 | | |
|---|-----------------------------|---|-------------------------|---------------------------------|--------|---|------------|--|
| | The Instru | ction Guide explains how | to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 22/114 Rpt: 25/188 | | |
| 2 | FILER NAME Texas Feder | ation of Republican Women F | PAC | | 3 | Filer ID (Ethics Commission 00054315 | on Filers) | |
| 4 | Date 09/05/2024 | 5 Full name of contributor Chamberlin, Barbara6 Contributor address; City; S | out-of-state PAC (ID#:_ | | 7 | Amount of Contribution (\$) | \$95.00 | |
| | | Trinity, TX 75862 | | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions | 3) | 9 Employer (See Instructions | s) | | | |
| | Date 09/01/2024 | Full name of contributor Chandler, Londa Contributor address; City; S | |) | | Amount of Contribution (\$) | \$80.00 | |
| | Principal occu | Marble Falls, TX 78654 pation / Job title (See Instructions | s) | Employer (See Instructions | s) | | | |
| | Retired | | | | | | | |
| | Date 07/08/2024 | Full name of contributor Chasteen, Kara Contributor address; City; S | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | \$100.00 | |
| | | Bertram, TX 78605 | | | | | | |
| | Principal occu Homemaker | pation / Job title (See Instructions | 5) | Employer (See Instructions Self | 5) | | | |
| | Date 07/12/2024 | Full name of contributor Cherokee Co. RW Contributor address; City; S Jacksonville, TX 75766 | |) | • | Amount of Contribution (\$) | \$25.00 | |
| | Principal occu | pation / Job title (See Instructions | s) | Employer (See Instructions | 5) | | | |
| | Date 08/23/2024 | Full name of contributor Christi Craddick Campaig Contributor address; City; S Austin, TX 78703 | | | | Amount of Contribution (\$) | \$1,000.00 | |
| | Principal occu | pation / Job title (See Instructions | 5) | Employer (See Instructions | 5) | | | |
| | | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|-----------------------------|--|---------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 23/114 Rpt: 26/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/10/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$160.00 |
| 8 | Principal occu | Kingwood, TX 77345 pation / Job title (See Instructions) | Employer (See Instructions | | | |
| 0 | Retired | pation / Job title (See instructions) | e Employer (See instructions |) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#: Cintron, Susie Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$75.00 |
| | | Kingwood, TX 77345 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/16/2024 | Full name of contributor out-of-state PAC (ID#:_ Clear Creek Republican Women Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$101.20 |
| | | League City, TX 77574 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/29/2024 | Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Marketing | Leander, TX 78641 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/13/2024 | Full name of contributor out-of-state PAC (ID#:_Cloud, Crystle Contributor address; City; State; Zip Code Leander, TX 78641 |) | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Marketing | pation / Job title (See Instructions) | Employer (See Instructions Self |) | | |
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| | MONET | ARY POLITICAL CO | ONTRIBUTION | S | | SCHEDUL | E A1 |
|---|---------------------------|--|-----------------------------------|---|----|---|-------------|
| | The Instruc | ction Guide explains how t | o complete this for | n. | 1 | Total pages Schedule A1: Sch: 24/114 Rpt: 27/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PA | С | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 07/03/2024 | 5 Full name of contributor Cobern, Trasa6 Contributor address; City; State | out-of-state PAC (ID#:e; Zip Code |) | 7 | Amount of Contribution (\$) | \$75.00 |
| | | Hurst, TX 76054 | | | | | |
| 8 | | pation / Job title (See Instructions) opment Officer | 9 | Employer (See Instructions 6 Stones Mission Netwo | | | |
| | Date 08/27/2024 | Full name of contributor Coffey, Debra Contributor address; City; State | | | | Amount of Contribution (\$) | \$80.00 |
| | Dringing age | Lampasas, TX 76550 | | Employer (See Instructions | _ | | |
| | Government | pation / Job title (See Instructions) Affairs | | Employer (See Instructions Smart Start LLC |) | | |
| | Date 08/02/2024 | Full name of contributor Coleman Co. RW Contributor address; City; State | out-of-state PAC (ID#:e; Zip Code |) | | Amount of Contribution (\$) | \$520.00 |
| | | Coleman, TX 76834 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 09/20/2024 | Full name of contributor Coleman Co. RW Contributor address; City; State | out-of-state PAC (ID#:e; Zip Code |) | | Amount of Contribution (\$) | \$175.00 |
| | Principal occu | Coleman, TX 76834 pation / Job title (See Instructions) | | Employer (See Instructions | i) | | |
| | Date 07/10/2024 | Full name of contributor Concho Valley Republican \ Contributor address; City; State San Angelo, TX 76906 | |) | | Amount of Contribution (\$) | \$202.40 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
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| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|---------------------------|--|------------------------------|----------|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 25/114 Rpt: 28/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/08/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$126.50 |
| | | San Angelo, TX 76906 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | i) | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_ Conner Harrington Republican Women Contributor address; City; State; Zip Code Plano, TX 75086 | | | Amount of Contribution (\$) | \$25.30 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 08/02/2024 | Full name of contributor out-of-state PAC (ID#:_ Coppell RW Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$100.00 |
| | | Coppell, TX 75019 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | ;) | | |
| | Date 07/02/2024 | Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$25.30 |
| | Principal occu | Copperas Cove, TX 76522-2572 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Date 07/27/2024 | Full name of contributor out-of-state PAC (ID#:_ Coryell County Republican Women Contributor address; City; State; Zip Code Copperas Cove, TX 76522-2572 | | | Amount of Contribution (\$) | \$25.30 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULI | E A1 |
|---|---------------------------|--|------------------------------|---------|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 26/114 Rpt: 29/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | ı Filers) |
| 4 | Date 07/31/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$80.00 |
| 8 | Principal occu | Houston, TX 77024 pation / Job title (See Instructions) | 9 Employer (See Instructions |) () | | |
| | Retired | sation, our title (occ manachons) | 2 Employer (See mandenons | ') | | |
| | Date 07/31/2024 | Full name of contributor out-of-state PAC (ID#:_ Cowell, Ronnye Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$480.00 |
| | Principal occu | Houston, TX 77024 pation / Job title (See Instructions) | Employer (See Instructions | () | | |
| | Retired | | | , | | |
| | Date 08/30/2024 | Full name of contributor out-of-state PAC (ID#:_ Cowell, Ronnye Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 |
| | | Houston, TX 77024 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | i) | | |
| | Date 09/19/2024 | Full name of contributor out-of-state PAC (ID#:_ Cowell, Ronnye Contributor address; City; State; Zip Code HOUSTON, TX 77024-6806 | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | () | | |
| | Date 09/20/2024 | Full name of contributor out-of-state PAC (ID#:_ Cowtown RW Contributor address; City; State; Zip Code Fort Worth, TX 76102 | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDULE | ■ A1 |
|---|---------------------------|--|------------------------------|---|---|-------------|
| | The Instruc | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 27/114 Rpt: 30/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | Filers) |
| 4 | Date 08/31/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$80.00 |
| _ | Dringing Loon | Marshall, TX 75672 | O Employer (Coa Instructions | | | |
| 8 | Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Cross Timbers RW Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$75.00 |
| | Dringing age | Stephenville, TX 76401 | Employer (Coo Instructions | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/02/2024 | Full name of contributor out-of-state PAC (ID#:_ Cy-Fair Republican Women Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$50.60 |
| | | Houston, TX 77095 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/16/2024 | Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$25.30 |
| | Principal occu | Houston, TX 77095 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/19/2024 | Full name of contributor out-of-state PAC (ID#:_ Darcy, Karen Contributor address; City; State; Zip Code Montgomery, TX 77356 | | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
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| | MONET | ARY POLITICAL CONTRIB | BUTION | S | | SCHEDUL | E A1 |
|---|----------------------------------|--|-------------|--|----|---|-------------|
| | The Instruc | ction Guide explains how to complet | te this for | n. | 1 | Total pages Schedule A1: Sch: 28/114 Rpt: 31/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commissio 00054315 | n Filers) |
| 4 | Date 07/05/2024 | Full name of contributor | |) | 7 | Amount of Contribution (\$) | \$75.00 |
| _ | Deignigal | Boerne, TX 78006 | lo. | Franklavav (Caa kastuvatiana | | | |
| 8 | Real Estate | pation / Job title (See Instructions) | 9 | Employer (See Instructions Dashiell Properties | 5) | | |
| | Date 09/24/2024 | Full name of contributor out-of-state F Davenport, Mona Contributor address; City; State; Zip Code | | | | Amount of Contribution (\$) | \$95.00 |
| | Deinsinal assu | Hallettsville, TX 77964 | - | Franksian (Caa Instructions | | | |
| | Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 08/23/2024 | Full name of contributor out-of-state FD David Spiller Campaign Contributor address; City; State; Zip Code | PAC (ID#: | | | Amount of Contribution (\$) | \$250.00 |
| | | Jacksboro, TX 76458 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 07/04/2024 | Full name of contributor out-of-state FD out-o | |) | | Amount of Contribution (\$) | \$150.00 |
| | Principal occu Admin | pation / Job title (See Instructions) | | Employer (See Instructions County of El Paso | 5) | | |
| | Date 09/25/2024 | Full name of contributor out-of-state FDavis, Suzanne Contributor address; City; State; Zip Code Houston, TX 77064 | | | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Painter/Design | pation / Job title (See Instructions) gner | | Employer (See Instructions Self | i) | | |
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| | MONET | ARY POLITICAL CONTRIBUT | IOI | NS | | SCHEDULE | ■ A1 |
|---|-----------------------------------|--|------|---------------------------------|----------------|---|-------------|
| | The Instru | ction Guide explains how to complete this | s fo | rm. | 1 | Total pages Schedule A1: Sch: 29/114 Rpt: 32/188 | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | Filers) |
| 4 | Date 08/27/2024 | 5 Full name of contributor out-of-state PAC (ID DeMarinis, Becky 6 Contributor address; City; State; Zip Code | | | 7 | Amount of Contribution (\$) | \$80.00 |
| | | San Angelo, TX 76903 | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 | Employer (See Instructions | s) | | |
| | Date 08/22/2024 | Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu | pation / Job title (See Instructions) | - | Employer (See Instructions | s) | | |
| | interior desig | gner | | Dtree Designs | | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (IDDees, Diane Contributor address; City; State; Zip Code | D#: | | | Amount of Contribution (\$) | \$75.00 |
| | | Richardson, TX 75080 | | | | | |
| | Principal occu Interior Design | pation / Job title (See Instructions) gner | | Employer (See Instructions Self | 5) | | |
| | Date 08/08/2024 | Full name of contributor out-of-state PAC (IEDiLillo, Marlene Contributor address; City; State; Zip Code Harker Heights, TX 76548 | |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | <u>I</u> S) | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (IED) Draper, Cheryl Contributor address; City; State; Zip Code Hallettsville, TX 77964 | | | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|---------------------------|--|------------------------------|----------------|---|-------------|
| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 30/114 Rpt: 33/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/06/2024 | Full name of contributor out-of-state PAC (ID#: Druce, Marlean Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$80.00 |
| _ | | Harker Heights, TX 76548 | 1 | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 08/14/2024 | Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu | Austin, TX 78732 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> ;) | | |
| | Transcription | ist | Self | | | |
| | Date 07/02/2024 | Full name of contributor out-of-state PAC (ID#: Dunkin, Carolyn Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$75.00 |
| | | Laguna Vista, TX 78578 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | ;) | | |
| | Date 08/19/2024 | Full name of contributor out-of-state PAC (ID#: East Montgomery County Republican Women- Contributor address; City; State; Zip Code New Caney, TX 77357 | | | Amount of Contribution (\$) | \$50.60 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 09/13/2024 | Full name of contributor out-of-state PAC (ID#: East Montgomery County Republican Women- Contributor address; City; State; Zip Code New Caney, TX 77357 | PAC | | Amount of Contribution (\$) | \$126.50 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | - 5) | | |
| | | | 1 | | | |

| | MONET | ARY POLITICAL CONTRIB | UTIONS | | SCHEDUL | E A1 |
|---|------------------------------|---|-----------------------|-----------|---|-------------|
| | The Instru | ction Guide explains how to complete | this form. | 1 | Total pages Schedule A1: Sch: 31/114 Rpt: 34/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 07/09/2024 | Full name of contributor out-of-state PA Ector Co. RW Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$400.00 |
| • | Principal occu | Odessa, TX 79768-4537 Dation / Job title (See Instructions) | 9 Employer (See Insti | ructions) | | |
| 0 | Fillicipal occu | oation / Job title (See Instructions) | 3 Employer (See msu | ructions) | | |
| | Date 07/28/2024 | Full name of contributor out-of-state PA Eddleman, Barbara Contributor address; City; State; Zip Code | AC (ID#: | | Amount of Contribution (\$) | \$80.00 |
| | | Conroe, TX 77304 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instr | ructions) | | |
| | Date 09/09/2024 | Full name of contributor out-of-state PA Eddleman, Barbara Contributor address; City; State; Zip Code | AC (ID#: | | Amount of Contribution (\$) | \$75.00 |
| | | Conroe, TX 77304 | <u> </u> | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Insti | ructions) | | |
| | Date 07/15/2024 | Full name of contributor out-of-state PA Edwards, Jacqueline Contributor address; City; State; Zip Code McKinney, TX 75072 | AC (ID#: | | Amount of Contribution (\$) | \$177.10 |
| | Principal occu Pharmacy S | oation / Job title (See Instructions) ales | Employer (See Instr | ructions) | | |
| | Date 07/01/2024 | Full name of contributor out-of-state PAEdwards, Sharon Contributor address; City; State; Zip Code Austin, TX 78730 | AC (ID#: | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | oation / Job title (See Instructions) | Employer (See Instr | ructions) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|---------------------------|--|--|---|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 32/114 Rpt: 35/188 | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/17/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Eickhoff, Elisabeth 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$25.00 |
| _ | | Burton, TX 77835 | | | | |
| 8 | Principal occu retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 09/17/2024 | Full name of contributor out-of-state PAC (ID#:_ Eickhoff, Elisabeth Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$25.00 |
| | | Burton, TX 77835 | | | | |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/17/2024 | Full name of contributor out-of-state PAC (ID#:_ Eickhoff, Elisabeth Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$25.00 |
| | | Burton, TX 77835 | | | | |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/02/2024 | Full name of contributor out-of-state PAC (ID#:_Eisner, Amanda Contributor address; City; State; Zip Code Georgetown, TX 78633 | | | Amount of Contribution (\$) | \$35.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/15/2024 | Full name of contributor out-of-state PAC (ID#: Ellen, Sandi Contributor address; City; State; Zip Code Dripping Spring, TX 78620 | | | Amount of Contribution (\$) | \$950.00 |
| | Principal occu Founder | pation / Job title (See Instructions) | Employer (See Instructions Texas Office Outfitters, I | | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | DNS | | SCHEDULI | E A1 |
|---|---------------------------|---|------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 33/114 Rpt: 36/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | ı Filers) |
| 4 | Date 07/12/2024 | Full name of contributor out-of-state PAC (ID#:_Ellis Co. RW PAC Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$150.00 |
| 8 | Principal occu | Italy, TX 76651 pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | | | | | | |
| | Date 09/25/2024 | Full name of contributor out-of-state PAC (ID#:_ Etnyre, Annette Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$95.00 |
| | | San Antonio, TX 78260 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/12/2024 | Full name of contributor out-of-state PAC (ID#:_Fannin Co. RW PAC Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$25.00 |
| | | Bonham, TX 75418-0712 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/12/2024 | Full name of contributor out-of-state PAC (ID#:_Fannin Co. RW PAC Contributor address; City; State; Zip Code Bonham, TX 75418-0712 | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/28/2024 | Full name of contributor out-of-state PAC (ID#:_Farabee, Sherry Contributor address; City; State; Zip Code Houston, TX 77095 |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIB | UTION | IS | | SCHEDUL | E A1 |
|---|---------------------------|--|----------|---|----|---|-------------|
| | The Instruc | ction Guide explains how to complete | this for | m. | 1 | Total pages Schedule A1: Sch: 34/114 Rpt: 37/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/19/2024 | Full name of contributor out-of-state PA Fauth, Sherry Contributor address; City; State; Zip Code | |) | 7 | Amount of Contribution (\$) | \$75.00 |
| _ | | Plantersville, TX 77363 | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 | Employer (See Instructions | 5) | | |
| | Date 07/09/2024 | Full name of contributor out-of-state PA Fayette Co. RW Contributor address; City; State; Zip Code | | | | Amount of Contribution (\$) | \$150.00 |
| | <u> </u> | La Grange, TX 78945 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | Date 07/24/2024 | Full name of contributor out-of-state PA Faykus, Susan Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$125.00 |
| | | Taylor, TX 76574 | | | | | |
| | | pation / Job title (See Instructions) uger/Founder/CEO | | Employer (See Instructions Faykus Financial LLC | i) | | |
| | Date 09/04/2024 | Full name of contributor out-of-state PA Felt, Kim Contributor address; City; State; Zip Code Jacksonville, TX 75766 | | | | Amount of Contribution (\$) | \$253.75 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | () | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PA Fisher, Jacquelyn Contributor address; City; State; Zip Code San Antonio, TX 78260 | | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
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| | MONET | ARY POLITICAL CON | TRIBUTION | S | | SCHEDUL | E A1 |
|---|------------------------------|--|--------------------|---|----|---|-------------|
| | The Instruc | ction Guide explains how to co | mplete this form | n. | 1 | Total pages Schedule A1: Sch: 35/114 Rpt: 38/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 07/02/2024 | Fitzpatrick, Lesli | of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$75.00 |
| 8 | Principal occu | AUSTIN, TX 78717 pation / Job title (See Instructions) | اه | Employer (See Instructions | .) | | |
| • | Attorney | pation / Job title (See Instructions) | | TDCJ | ') | | |
| | Date 08/27/2024 | Full name of contributor out- litzpatrick, Lesli Contributor address; City; State; Zip | of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$80.00 |
| | Dringinal occu | AUSTIN, TX 78717 pation / Job title (See Instructions) | | Employer (See Instructions | _ | | |
| | Attorney | pation / Job title (See Instructions) | | TDCJ | ') | | |
| | Date 08/23/2024 | Full name of contributor | of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$80.00 |
| | | Winnsboro, TX 75494 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | i) | | |
| | Date 07/06/2024 | Flowers, Shelly | | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu IT Manager | pation / Job title (See Instructions) | | Employer (See Instructions Blanco County Republic | | Women | |
| | Date 08/28/2024 | Fox, Sherry | |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | () | | |
| | | | ' | | | | |

| | MONET | ARY POLITICAL (| CONTRIBUTIO | ONS | | SCHEDULE | A1 |
|---|-------------------------------|--|-------------------------|--|----|---|-----------|
| | The Instru | ction Guide explains hov | v to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 36/114 Rpt: 39/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women | PAC | | 3 | Filer ID (Ethics Commission 00054315 | Filers) |
| 4 | Date 09/03/2024 | 5 Full name of contributor Frank, Deborah6 Contributor address; City; S | out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | \$95.00 |
| | | La Grange, TX 78945 | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instruction | 5) | 9 Employer (See Instructions | 5) | | |
| | Date 08/28/2024 | Full name of contributor Frazier, LaVonne Contributor address; City; S | out-of-state PAC (ID#:_ | | - | Amount of Contribution (\$) | \$80.00 |
| | Delinainal annu | GEORGETOWN, TX 786 | | | | | |
| | Retired | pation / Job title (See Instruction | 5) | Employer (See Instructions | 5) | | |
| | Date 08/29/2024 | Full name of contributor Frazier, Tracie Contributor address; City; S | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | \$80.00 |
| | | McKinney, TX 75072 | | | | | |
| | Principal occu VP Marketin | pation / Job title (See Instruction: g | 5) | Employer (See Instructions KDC Real Estate Devel | | ment | |
| | Date 08/12/2024 | Full name of contributor Friedrich, Susan Contributor address; City; S Georgetown, TX 78628 | |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Bookkeeper | pation / Job title (See Instruction: | 5) | Employer (See Instructions self employed | 5) | | |
| | Date 09/22/2024 | Full name of contributor Friedrich, Susan Contributor address; City; S Georgetown, TX 78628 | out-of-state PAC (ID#:_ | | • | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Bookkeeper | pation / Job title (See Instruction | 5) | Employer (See Instructions self employed | 5) | | |
| | | | | 1 | | | |

| | MONEI | ARY POLITICAL CONTRIBU | JIIONS | | SCHEDUL | E A1 | |
|---|-------------------------------|---|--|-----------------|---|-------------|--|
| | The Instru | ction Guide explains how to complete | this form. | 1 | Total pages Schedule A1: Sch: 37/114 Rpt: 40/188 | | |
| 2 | FILER NAME | | | 3 | 3 Filer ID (Ethics Commission Filers) | | |
| | Texas Feder | ation of Republican Women PAC | | | 00054315 | | |
| 4 | Date 08/27/2024 | Full name of contributor out-of-state PAG Fulton, Diane Contributor address; City; State; Zip Code | C (ID#:) | 7 | Amount of Contribution (\$) | \$80.00 | |
| | | Austin, TX 78746 | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | is) | | | |
| | Date | Full name of contributor ut-of-state PAG | C (ID#:) | | Amount of Contribution (\$) | | |
| | 08/22/2024 | Gaines, Kerry | | | | \$80.00 | |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | Richardson, TX 75080 | | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | ıs) | | | |
| | Bookkeeper | | Self-Employed | | | | |
| | Date | Full name of contributor out-of-state PAG | C (ID#:) | | Amount of Contribution (\$) | | |
| | 09/25/2024 | Gaines, Kerry | | | | \$75.00 | |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | Richardson, TX 75080 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | ıs) | | | |
| | Bookkeeper | | Self-Employed | | | | |
| | Date | Full name of contributor ut-of-state PAG | C (ID#:) | | Amount of Contribution (\$) | | |
| | 09/04/2024 | Gardner, Shellie Contributor address; City; State; Zip Code | | | | \$95.00 | |
| | | Benbrook, TX 76116-0000 | | | | | |
| | Principal occu Business Ov | pation / Job title (See Instructions) rner | Employer (See Instructions Christmas Light Source | | | | |
| | Date | Full name of contributor ut-of-state PAG | C (ID#:) | | Amount of Contribution (\$) | | |
| | 08/12/2024 | Garrett, Kellye Duncan | | | | \$400.00 | |
| | | Contributor address; City; State; Zip Code San Angelo, TX 76904 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | | | |
| | Retired | | | | | | |
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| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|---------------------------|---|------------------------------|----|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 38/114 Rpt: 41/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commissio 00054315 | n Filers) |
| 4 | Date 07/03/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$75.00 |
| _ | | San Antonio, TX 78231 | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 08/19/2024 | Full name of contributor out-of-state PAC (ID#:_ Gartner, Sylvia Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$80.00 |
| | Dringinal occu | San Antonio, TX 78231 pation / Job title (See Instructions) | Employer (See Instructions | _ | | |
| | Retired | oalion7 Job title (See instructions) | Employer (See instructions | ') | | |
| | Date 09/20/2024 | Full name of contributor out-of-state PAC (ID#:_ Gateway City RW Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$75.00 |
| | | Laredo, TX 78041 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | i) | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Geanie Morrison Campaign Contributor address; City; State; Zip Code Victoria, TX 77903 |) | | Amount of Contribution (\$) | \$5,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 07/24/2024 | Full name of contributor out-of-state PAC (ID#:_Gella, Sarah Contributor address; City; State; Zip Code Floresville, TX 78114 |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | () | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|---------------------------|---|------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 39/114 Rpt: 42/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/18/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$95.00 |
| _ | | Montgomery, TX 77316 | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 07/25/2024 | Full name of contributor out-of-state PAC (ID#:_ Georgatos, Debora Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$253.75 |
| | Principal occu | WESTON, TX 75009 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | self employe | | p.o) o. (000ou uou uou | , | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (ID#:_ Georgetown Area RW Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$160.00 |
| | | Georgetown, TX 78633 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/11/2024 | Full name of contributor out-of-state PAC (ID#:_ Georgetown Area Republican Women Contributor address; City; State; Zip Code Georgetown, TX 78633 | | | Amount of Contribution (\$) | \$177.10 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/03/2024 | Full name of contributor out-of-state PAC (ID#:_ Georgetown Area Republican Women Contributor address; City; State; Zip Code Georgetown, TX 78633 | | | Amount of Contribution (\$) | \$50.60 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULE | ■ A1 |
|---|---------------------------|--|------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 40/114 Rpt: 43/188 | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | ı Filers) |
| 4 | Date 08/04/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Georgetown Area Republican Women 6 Contributor address; City; State; Zip Code |) | 7 | Amount of Contribution (\$) | \$25.30 |
| _ | Daine in all account | Georgetown, TX 78633 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Georgetown Area Republican Women Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$50.60 |
| | Principal occu | georgetown, TX 78633 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/28/2024 | Full name of contributor out-of-state PAC (ID#:_Gibb, Catherine Contributor address; City; State; Zip Code Plano, TX 75074 | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID#:_ Gibson, Tina Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Retired | Sugar Land, TX 77498 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/09/2024 | Full name of contributor out-of-state PAC (ID#:_ Gibson, Tina Contributor address; City; State; Zip Code Sugar Land, TX 77498 | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|-------------------------------|---|---|----------------|---|-------------|
| | The Instru | ction Guide explains how to complete this t | form. | 1 | Total pages Schedule A1: Sch: 41/114 Rpt: 44/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#: Gillespie Co RW Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$25.00 |
| _ | | Fredericksburg, TX 78624 | T | _ | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Date 08/11/2024 | Full name of contributor out-of-state PAC (ID#: Gillespie, Jade Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 |
| | Deinsinal | Georgetown, TX 78626 | T Familia de Cara la atractica de | | | |
| | | | Employer (See Instructions Conservative Energy Ne | | rork | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID#:_ Gilmore, Lisa Contributor address; City; State; Zip Code | | • | Amount of Contribution (\$) | \$95.00 |
| | | The Woodlands, TX 77381 | | | | |
| | Principal occu Business Ov | pation / Job title (See Instructions) ner | Employer (See Instructions self | s) | | |
| | Date 08/30/2024 | Full name of contributor out-of-state PAC (ID#:_Glowka, Virginia Contributor address; City; State; Zip Code Adkins, TX 78101 |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | <u>l</u> s) | | |
| | Date 07/03/2024 | Full name of contributor out-of-state PAC (ID#: Golden Corridor Republican Women Contributor address; City; State; Zip Code Allen, TX 75013 | | | Amount of Contribution (\$) | \$683.10 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULE | ■ A1 |
|---|---------------------------|---|------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 42/114 Rpt: 45/188 | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | Filers) |
| 4 | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#:_Golden Corridor Republican Women Contributor address; City; State; Zip Code |) | 7 | Amount of Contribution (\$) | \$253.00 |
| _ | | MCKINNEY, TX 75071 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 09/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Golden Corridor Republican Women Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$25.30 |
| | Principal occu | MCKINNEY, TX 75071 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Golden Triangle RW Contributor address; City; State; Zip Code Beaumont, TX 77726 | | | Amount of Contribution (\$) | \$1,325.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/12/2024 | Full name of contributor out-of-state PAC (ID#:_ Grayson Co. RW Contributor address; City; State; Zip Code Howe, TX 75459 |) | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_ Grayson Co. RW Contributor address; City; State; Zip Code Howe, TX 75459 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|---------------------------|---|----------------------------|----------|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 43/114 Rpt: 46/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/23/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$50.00 |
| 8 | Principal occu | Halletstillve, TX 77964 pation / Job title (See Instructions) | Employer (See Instructions | 3) | | |
| | · ····o.pa. oooa | salion, our time (coo mandonelle) | = inpleyer (eee measure | , | | |
| | Date 07/20/2024 | Full name of contributor out-of-state PAC (ID#: Greater El Paso Republican Women Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$101.20 |
| | | El Paso, TX 79925 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 09/08/2024 | Full name of contributor | | | Amount of Contribution (\$) | \$50.60 |
| | | El Paso, TX 79925 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:Greater Houston Council Contributor address; City; State; Zip Code Houston, TX 77024 |) | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Date 08/28/2024 | Full name of contributor out-of-state PAC (ID#: Greer, Deborah Contributor address; City; State; Zip Code Richardson, TX 75081 |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | ·) | | |
| | | <u>'</u> | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|-----------------------------|--|------------------------------|-------|---|-------------|
| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 44/114 Rpt: 47/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/03/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$80.00 |
| _ | 5 | Plano, TX 75093 | 10 5 1 10 11 11 | | | |
| 8 | Principal occu Housewife | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 08/13/2024 | Full name of contributor out-of-state PAC (ID#: Gschwind, Suzanne Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu | Kerrville, TX 78028 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Retired | odion 7 oob title (oee mondellons) | Employer (See manachoris | ') | | |
| | Date 09/20/2024 | Full name of contributor out-of-state PAC (ID#: Guadalupe Co. RW Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$125.00 |
| | | Seguin, TX 78156-0176 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | i) | | |
| | Date 08/30/2024 | Full name of contributor out-of-state PAC (ID#: Guild, Joan Contributor address; City; State; Zip Code Calvert, TX 77837 | | | Amount of Contribution (\$) | \$640.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 07/02/2024 | Full name of contributor out-of-state PAC (ID#: Guitian Roan, Deborah Contributor address; City; State; Zip Code Houston, TX 77059 | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULE | ■ A1 |
|---|---------------------------|--|------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 45/114 Rpt: 48/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | Filers) |
| 4 | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#: Guitian Roan, Deborah Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$75.00 |
| 8 | Principal occu | Houston, TX 77059 pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Retired | , | , ,,, | , | | |
| | Date 08/28/2024 | Full name of contributor out-of-state PAC (ID#: Gurley, Chris Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 |
| | | Montgomery, TX 77356 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/12/2024 | Full name of contributor | | | Amount of Contribution (\$) | \$75.00 |
| | | Houston, TX 77056-4185 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID#: HAUSER, BARBARA Contributor address; City; State; Zip Code Houston, TX 77056-4185 | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID#: HAUSER, BARBARA Contributor address; City; State; Zip Code Houston, TX 77056-4185 | | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ONETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE A1 | | | |
|---|---------------------------|--|------------------------------|---|---|-----------|--|--|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 46/114 Rpt: 49/188 | | | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) | | |
| 4 | Date 08/13/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Harclerode, Barsa 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$80.00 | | |
| _ | | Leander, TX 78641 | | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | | | |
| | Date 07/17/2024 | Full name of contributor out-of-state PAC (ID#:_ Hardin County Republican Women Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$253.00 | | |
| | Principal occu | Lumberton, TX 77657 pation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_ Harper, Debra Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$500.00 | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
| | Date 09/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Harper, Debra Contributor address; City; State; Zip Code Heath, TX 75032 | | | Amount of Contribution (\$) | \$75.00 | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
| | Date 09/18/2024 | Full name of contributor out-of-state PAC (ID#:_ Harper, Debra Contributor address; City; State; Zip Code Heath, TX 75032 | | | Amount of Contribution (\$) | \$25.00 | | |
| | Principal occuretired | pation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
| | | | | | | | | |

| | MONET | ARY POLITICAL C | ONTRIBUTION | NS | | SCHEDUL | E A1 |
|---|---------------------------|---|--|---|----------------|---|-------------|
| | The Instru | ction Guide explains how | to complete this for | m. | 1 | Total pages Schedule A1: Sch: 47/114 Rpt: 50/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women P | AC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/11/2024 | 5 Full name of contributor Hart Steinmann, Jessica6 Contributor address; City; Sta | out-of-state PAC (ID#: ate; Zip Code | | 7 | Amount of Contribution (\$) | \$95.00 |
| _ | Dringing! aggs | Montgomery, TX 77316 | lo. | Employer (Coo Instructions | <u></u> | | |
| 8 | General Cou | pation / Job title (See Instructions) Insel | 9 | Employer (See Instructions America First Policy Ins | | te | |
| | Date 08/08/2024 | Full name of contributor Hartmann, Diana Contributor address; City; Sta | |) | | Amount of Contribution (\$) | \$160.00 |
| | | Abilene, TX 79602 | | 5 1 (0 1 1 1 | <u></u> | | |
| | Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 08/02/2024 | Full name of contributor Hatridge, Pam Contributor address; City; Sta | out-of-state PAC (ID#:ate; Zip Code |) | | Amount of Contribution (\$) | \$35.00 |
| | | Salado, TX 76571-6615 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| | Date 08/11/2024 | Full name of contributor Hatridge, Pam Contributor address; City; Sta Salado, TX 76571 | out-of-state PAC (ID#: atte; Zip Code |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | <u>I</u> S) | | |
| | Date 07/30/2024 | Full name of contributor Hays County Republican \(\) Contributor address; City; Sta Dripping Springs, TX 7862 | tte; Zip Code |) | | Amount of Contribution (\$) | \$151.80 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
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| | MONET | ONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDULE A1 | | | |
|---|--------------------------------|---|--------------------|---|----------|---|-----------|--|--|
| | The Instru | ction Guide explains how to co | mplete this for | m. | 1 | Total pages Schedule A1: Sch: 48/114 Rpt: 51/188 | | | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) | | |
| 4 | Date 08/28/2024 | Full name of contributor | |) | 7 | Amount of Contribution (\$) | \$177.10 | | |
| _ | Driveries also second | Dripping Springs, TX 78620 | | Foundament (Octobration et la contraction et la | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 | Employer (See Instructions | 5) | | | | |
| | Date 08/12/2024 | Full name of contributor out-out-out-out-out-out-out-out-out-out- | | | | Amount of Contribution (\$) | \$379.50 | | |
| | Deinsinal assu | Austin, TX 78728 | | Franksian (Caalinatuustiana | _ | | | | |
| | Independent | pation / Job title (See Instructions) | | Employer (See Instructions self employed | 5) | | | | |
| | Date 08/28/2024 | Full name of contributor out-out-out-out-out-out-out-out-out-out- | of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$202.40 | | |
| | | Austin, TX 78728 | | | | | | | |
| | Principal occu Independent | pation / Job title (See Instructions) | | Employer (See Instructions self employed | <u> </u> | | | | |
| | Date 07/03/2024 | Hefley, Dianne | | | | Amount of Contribution (\$) | \$75.00 | | |
| | Principal occu Retired Teac | pation / Job title (See Instructions) her/Realtor | | Employer (See Instructions Coldwell Banker First Ed | | y, Realtors | | | |
| | Date 09/26/2024 | Full name of contributor out-out-out-out-out-out-out-out-out-out- | of-state PAC (ID#: | | | Amount of Contribution (\$) | \$95.00 | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions |) | | | | |
| | | | 1 | | | | | | |

| | MONET | MONETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE A1 | | | |
|---|-----------------------------|---|----------------------------------|---|---|-----------|--|--|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 49/114 Rpt: 52/188 | | | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) | | |
| 4 | Date 09/26/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$75.00 | | |
| _ | | Beaumont, TX 77706 | | | | | | |
| 8 | Principal occu Partner | pation / Job title (See Instructions) | 9 Employer (See Instructions UCB |) | | | | |
| | Date 08/31/2024 | Full name of contributor out-of-state PAC (ID#:_ Herrera, Diane Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 | | |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
| | Business Owner | | CSSI | | | | | |
| | Date 09/11/2024 | Full name of contributor out-of-state PAC (ID#:_ Hickland, Hillary Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$95.00 | | |
| | | Belton, TX 76513 | | | | | | |
| | Principal occu Volunteer | pation / Job title (See Instructions) | Employer (See Instructions Self |) | | | | |
| | Date 09/14/2024 | Full name of contributor out-of-state PAC (ID#:_ Hicks, Nancy Contributor address; City; State; Zip Code Spring, TX 77382 | | | Amount of Contribution (\$) | \$75.00 | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
| | Date 07/30/2024 | Full name of contributor out-of-state PAC (ID#:_ High Plains Republican Women Contributor address; City; State; Zip Code Amarillo, TX 79114 | | | Amount of Contribution (\$) | \$101.20 | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
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| | MONET | IONETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE A1 | | | |
|---|---------------------------|---|-------------------------------|---|---|-----------|--|--|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 50/114 Rpt: 53/188 | | | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) | | |
| 4 | Date 09/15/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ High Plains Republican Women 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$101.20 | | |
| _ | Discipal | Amarillo, TX 79114 | | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID#:_ Holsinger, Cindy Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 | | |
| | Deignainal agai | Trinity, TX 75862 | Franklause (Coo la structions | | | | | |
| | Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
| | Date 09/15/2024 | Full name of contributor out-of-state PAC (ID#:_ Holsinger, Cindy Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$75.00 | | |
| | | Trinity, TX 75862 | | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID#:_ Holt, Janis Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 | | |
| | • | SILSBEE, TX 77656 pation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
| | Date 08/21/2024 | Full name of contributor out-of-state PAC (ID#:_ Howard, Betty Sue Contributor address; City; State; Zip Code Austin, TX 78737 | Self | | Amount of Contribution (\$) | \$80.00 | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
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| | MONET | ARY POLITICAL CONTRIBU | SCHEDULE A1 | | | | |
|---|-------------------------------|---|-------------|--------------------------------|----|---|-----------|
| | The Instru | ction Guide explains how to complete th | nis fo | rm. | 1 | Total pages Schedule A1: Sch: 51/114 Rpt: 54/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/11/2024 | Full name of contributor | | | 7 | Amount of Contribution (\$) | \$80.00 |
| _ | | Belton, TX 76513 | - 1- | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 | Employer (See Instructions | 5) | | |
| | Date 09/09/2024 | Full name of contributor out-of-state PAC Howard, Brenda Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$75.00 |
| | Dringinal occu | Belton, TX 76513 pation / Job title (See Instructions) | <u> </u> | Employer (See Instructions | ·/ | | |
| | Retired | oation / Job title (See matractions) | | Employer (See instructions | ·) | | |
| | Date 07/02/2024 | Full name of contributor uut-of-state PAC Huff, Celeste Contributor address; City; State; Zip Code | (ID#: | | | Amount of Contribution (\$) | \$75.00 |
| | | Edinburg, TX 78539 | | | | | |
| | Principal occu Regional En | pation / Job title (See Instructions) gagement | | Employer (See Instructions RNC | s) | | |
| | Date 08/14/2024 | Full name of contributor out-of-state PAC Hull, Robbi Contributor address; City; State; Zip Code Austin, TX 78738 | | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | oation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC Hull, Robbi Contributor address; City; State; Zip Code Austin, TX 78738 | | | | Amount of Contribution (\$) | \$190.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | SCHEDULE A | | | |
|---|---------------------------|--|------------------------------|----------|---|-----------|
| | The Instruc | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 52/114 Rpt: 55/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/09/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$75.00 |
| _ | 5 | Austin, TX 78738 | | | | |
| 8 | Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 09/17/2024 | Full name of contributor out-of-state PAC (ID#:_ Hunn, Debra Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$25.30 |
| | Principal occu | Fort Worth, TX 76102 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Real Estate | | p) (| , | | |
| | Date 08/02/2024 | Full name of contributor | | | Amount of Contribution (\$) | \$35.00 |
| | | Canyon Lake, TX 78133 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | () | | |
| | Date 08/20/2024 | Full name of contributor out-of-state PAC (ID#:_Hunt, Jan Contributor address; City; State; Zip Code Canyon Lake, TX 78133 | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 08/02/2024 | Full name of contributor out-of-state PAC (ID#:_ Hunt, Jan Contributor address; City; State; Zip Code Canyon Lake, TX 78133 | | | Amount of Contribution (\$) | \$303.60 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | () | | |
| | | | | | | |

| | MONET | MONETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE A1 | | | |
|---|---------------------------|---|----------------------------------|----------|---|-----------|--|--|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 53/114 Rpt: 56/188 | | | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) | | |
| 4 | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID#:_ Hurt, Sherry Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$80.00 | | |
| _ | | Midland, TX 79711 | Ta = 1 (2 1 1 1 | | | | | |
| 8 | Principal occu Sales | ipation / Job title (See Instructions) | 9 Employer (See Instructions Pbp | 5) | | | | |
| | Date 09/18/2024 | Full name of contributor out-of-state PAC (ID#:_ Hurt, Sherry Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$75.00 | | |
| | Principal occu | Midland, TX 79711 upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | | | |
| | Sales | | PBP | | | | | |
| | Date 08/30/2024 | Full name of contributor out-of-state PAC (ID#:_ Irving Repubican Women Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$101.20 | | |
| | | Irving, TX 75062 | | | | | | |
| | Principal occu | ıpation / Job title (See Instructions) | Employer (See Instructions | 5) | | | | |
| | Date 07/29/2024 | Full name of contributor out-of-state PAC (ID#:_ Irving Republican Women Contributor address; City; State; Zip Code Irving, TX 75062-4459 | | | Amount of Contribution (\$) | \$20.20 | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 5) | | | | |
| | Date 07/29/2024 | Full name of contributor out-of-state PAC (ID#:_ Irving Republican Women Contributor address; City; State; Zip Code Irving, TX 75062-4459 | | | Amount of Contribution (\$) | \$25.30 | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | SCHEDULE A1 | | | |
|---|-----------------------------|---|------------------------------------|-------------|---|------------|--|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 54/114 Rpt: 57/188 | | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | on Filers) | |
| 4 | Date 08/02/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Jay Dean Campaign 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$1,000.00 | |
| _ | Daine in all accord | Lonview, TX 75606 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions) |) | | | |
| | Date 09/17/2024 | Full name of contributor out-of-state PAC (ID#:_ Jenike, Karen Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$95.00 | |
| | | San Angelo, TX 76904 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | | |
| | Date 09/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Jett, Sonya Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$95.00 | |
| | | Florence, TX 76527 | | | | | |
| | Principal occu Sales | pation / Job title (See Instructions) | Employer (See Instructions Self |) | | | |
| | Date 09/24/2024 | Full name of contributor out-of-state PAC (ID#:_ Johnson, Pam Contributor address; City; State; Zip Code Denton, TX 76210 |) | | Amount of Contribution (\$) | \$190.00 | |
| | Principal occu Paralegal | pation / Job title (See Instructions) | Employer (See Instructions Self |) | | | |
| | Date 08/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Jones, Jenifer Contributor address; City; State; Zip Code Cedar Park, TX 78613 | | | Amount of Contribution (\$) | \$80.00 | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | SCHEDULE A1 | | | |
|---|--------------------------------|--|--|------------|---|-----------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 55/114 Rpt: 58/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/10/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$80.00 |
| _ | <u> </u> | Kingwood, TX 77339 | | | | |
| 8 | Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 08/30/2024 | Full name of contributor out-of-state PAC (ID#:_ Jung, Louise Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu | Floresville, TX 78114 pation / Job title (See Instructions) | Employer (See Instructions | () | | |
| | Retired | | | , | | |
| | Date 09/10/2024 | Full name of contributor out-of-state PAC (ID#:_ KARNES COUNTY REPUBLICAN WOMEN Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$531.30 |
| | | KARNES CITY, TX 78118 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | i) | | |
| | Date 09/23/2024 | Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Registered N | Hallettsville, TX 77964 pation / Job title (See Instructions) lurse | Employer (See Instructions Lavaca Medical Center | <u>;</u>) | | |
| | Date 07/12/2024 | Full name of contributor out-of-state PAC (ID#:_ Karnes County Republican Women Club Contributor address; City; State; Zip Code Karnes City, TX 78118 |) | | Amount of Contribution (\$) | \$20.20 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
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| | MONET | MONETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE A1 | | | |
|---|--------------------------------|---|--|---|---|-----------|--|--|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 56/114 Rpt: 59/188 | | | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) | | |
| 4 | Date 07/12/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Karnes County Republican Women Club 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$708.40 | | |
| _ | Dringing! goog | Karnes City, TX 78118 | 0 Employer (Co.) Instructions | | | | | |
| 8 | Principal occu | ipation / Job title (See Instructions) | 9 Employer (See Instructions |) | | | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Keith Bell Property Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$250.00 | | |
| | Principal occu | Forney, TX 75126 upation / Job title (See Instructions) | Employer (See Instructions | | | | | |
| | i illicipai occa | pation 7 oob title (oce instructions) | Employer (See Manacions | , | | | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_ Kelley, Margaret Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$507.50 | | |
| | | Humble, TX 77346 | | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Kingwood Area Rw Contributor address; City; State; Zip Code Kingwood, TX 77325 |) | | Amount of Contribution (\$) | \$50.00 | | |
| | Principal occu | ppation / Job title (See Instructions) | Employer (See Instructions |) | | | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_Kitzman, Stan Contributor address; City; State; Zip Code Pattison, TX 77466 | | | Amount of Contribution (\$) | \$80.00 | | |
| | Principal occu State Repres | ipation / Job title (See Instructions) sentative | Employer (See Instructions State of Texas |) | | | | |
| | | | | | | | | |

| | MONET | ARY POLITICAL CONT | SCHEDULE A1 | | | | |
|---|-------------------------------|---|--------------------|---|----------|---|-----------|
| | The Instru | ction Guide explains how to co | mplete this for | n. | 1 | Total pages Schedule A1: Sch: 57/114 Rpt: 60/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/18/2024 | Full name of contributor out-out-out-out-out-out-out-out-out-out- | | | 7 | Amount of Contribution (\$) | \$95.00 |
| | | Plano, TX 75075 | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 | Employer (See Instructions | 5) | | |
| | Date 09/06/2024 | Full name of contributor out-out-out-out-out-out-out-out-out-out- | |) | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu | Seguin, TX 78155 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | Flooring Bro | | | Self | | | |
| | Date 08/29/2024 | Full name of contributor out-out-out-out-out-out-out-out-out-out- | of-state PAC (ID#: | | | Amount of Contribution (\$) | \$80.00 |
| | | Austin, TX 78738 | | | | | |
| | Principal occu real estate | pation / Job title (See Instructions) | | Employer (See Instructions Tex Cal Properties |) | | |
| | Date 07/18/2024 | Lacy, Rhonda | | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 09/05/2024 | Full name of contributor out-out-out-out-out-out-out-out-out-out- | of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | | | L_ | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDUL | E A1 |
|---|----------------------------------|---|-------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 58/114 Rpt: 61/188 | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/05/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Lake Conroe Area RW 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$150.00 |
| _ | Daine in all account | Montgomery, TX 77356-0737 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions) |) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_ Lake Conroe Area RW Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu | Montgomery, TX 77356-0737 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/20/2024 | Full name of contributor out-of-state PAC (ID#:_ Lake Conroe RW PAC Contributor address; City; State; Zip Code Montgomery, TX 77356-0737 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/26/2024 | Full name of contributor out-of-state PAC (ID#:_Laue, Susan Contributor address; City; State; Zip Code LEANDER, TX 78641-3825 |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/31/2024 | Full name of contributor out-of-state PAC (ID#:_ Leander Area RW Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$160.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDUL | ILE A1 | |
|---|----------------------------------|--|-------------------------------|---|---|---------------|--|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 59/114 Rpt: 62/188 | | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) | |
| 4 | Date 09/20/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Leander Area RW 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$250.00 | |
| _ | | Leander, TX 78641 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions) |) | | | |
| | Date 09/01/2024 | Full name of contributor out-of-state PAC (ID#:_Leander Area RW Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$126.50 | |
| | Principal occu | Leander, TX 78646 pation / Job title (See Instructions) | Employer (See Instructions | | | | |
| | r inicipal occu | pation / 300 title (See Instructions) | Employer (See instructions | , | | | |
| | Date 07/27/2024 | Full name of contributor |) | | Amount of Contribution (\$) | \$101.20 | |
| | | Leander, TX 78641 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | | |
| | Date 07/13/2024 | Full name of contributor out-of-state PAC (ID#:_Leeis, Roxann Contributor address; City; State; Zip Code Alvin, TX 77511 | | | Amount of Contribution (\$) | \$100.00 | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#:_ Leidy, Kaye Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUT | SCHEDULE A | | | |
|---|---------------------------|---|------------------------------|----------------|---|-----------|
| | The Instru | ction Guide explains how to complete this | s form. | 1 | Total pages Schedule A1: Sch: 60/114 Rpt: 63/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/20/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$80.00 |
| _ | | San Antonio, TX 78259 | T | Ĺ | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Date 09/09/2024 | Full name of contributor out-of-state PAC (ID Lewis, Roxann Contributor address; City; State; Zip Code | #:) | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Retired | Alvin, TX 77511 pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date 09/09/2024 | Full name of contributor | #:) | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu | Alvin, TX 77511 pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Retired | oution / Job title (See Instructions) | Employer (See Instructions | 3) | | |
| | Date 09/04/2024 | Full name of contributor | #:) | | Amount of Contribution (\$) | \$20.20 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | | |
| | Date 09/04/2024 | Full name of contributor out-of-state PAC (ID Liberman, Kathleen Contributor address; City; State; Zip Code Corinth, TX 75215 | #:) | | Amount of Contribution (\$) | \$253.00 |
| | Principal occu Retired | oation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | | | • | | | |

| | MONEI | ARY POLITICAL C | ONTRIBUTIO | ONS | | SCHEDUL | E A1 |
|---|---------------------------|--|-------------------------|------------------------------|---|---|------------|
| | The Instru | ction Guide explains how t | o complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 61/114 Rpt: 64/188 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Texas Feder | ation of Republican Women PA | AC | | | 00054315 | |
| 4 | Date | 5 Full name of contributor | out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | ¢1 000 00 |
| | 08/02/2024 | Little, Pam | ro. Zin Codo | | | | \$1,000.00 |
| | | 6 Contributor address; City; Stat | e, zip Code | | | | |
| • | Dringing con | McKinney, TX 75069-1521 pation / Job title (See Instructions) | | Employer (See Instructions | ·/_ | | |
| 0 | Retired | pation / Job title (See instructions) | | 9 Employer (See Instructions |) | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ | , | Π | Amount of Contribution (\$) | |
| | 08/26/2024 | Long, Cynthia | out-of-state PAC (ID# |) | | Amount of Contribution (\$) | \$80.00 |
| | 00,20,202 | Contributor address; City; Stat | e· Zin Code | | | | 400.00 |
| | | | .c, <u>-</u> .p | | | | |
| | | | | | | | |
| | | Cedar Park, TX 78630 | | | | | |
| | | Principal occupation / Job title (See Instructions) Employer (See County Commissioner | | | 5) | | |
| | | | WIlliamson County | _ | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | *** |
| | 08/09/2024 | Long, Rebecca | | | | | \$80.00 |
| | | Contributor address; City; Stat | e; Zip Code | | | | |
| | | | | | | | |
| | | San Angelo, TX 76901 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Retired | | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | |
| | 08/13/2024 | Lothringer, Lauren | | | | | \$80.00 |
| | | Contributor address; City; Stat | e; Zip Code | | | | |
| | | | | | | | |
| | | Houston, TX 77070 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | Consultant | , | | Engage Right | , | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Π | Amount of Contribution (\$) | |
| | 07/30/2024 | Lunsford, Renee | - | | | ., | \$80.00 |
| | | Contributor address; City; Stat | e; Zip Code | | | | |
| | | | | | | | |
| | | | | | | | |
| | Delin 1 1 | Huntsville, TX 77340 | | Franks (O. 1. 1. 1. | Ĺ | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Reliieu | | | | | | |
| | | | | | | | |
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| | MONEI | MONETARY POLITICAL CONTRIBUTIONS | | | | | ■ A1 |
|---|---------------------------|--|-------------------------|------------------------------|----------|---|----------------|
| | The Instru | ction Guide explains how to | complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 62/114 Rpt: 65/188 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | ation of Republican Women PAC | | | | 00054315 | |
| 4 | Date 09/09/2024 | Lunsford, Renee | out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | \$75.00 |
| | | 6 Contributor address; City; State;Huntsville, TX 77340 | Zip Code | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instructions | <u> </u> | | |
| Ŭ | Retired | sation 7 des title (dee motitudions) | | • Employer (God mondonorio | , | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ | , | | Amount of Contribution (\$) | |
| | 08/04/2024 | M Norton, Aimee | out-of-state PAC (ID# | | | Amount of Contribution (4) | \$80.00 |
| | 00/04/2024 | Contributor address; City; State; | | | | | φου.σσ |
| | | Continuation address, City, State, | Zip Code | | | | |
| | | | | | | | |
| | | Rockwall, TX 75087 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | () | | |
| | Realtor | | | Self | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 07/05/2024 | MARTINEZ, JULIANA | | | | | \$75.00 |
| | | Contributor address; City; State; | Zip Code | | | | |
| | | | | | | | |
| | | Dallas, TX 75240 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | Retired | | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 07/24/2024 | MORRISON, GINA | ` _ | | | ,, | \$80.00 |
| | | Contributor address; City; State; | Zip Code | | | | |
| | | | | | | | |
| | | | | | | | |
| | | DALLAS, TX 75287 | | | L | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | i) | | |
| | | | | | _ | | |
| | Date | - | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | <u></u> ቀշ⊑ 00 |
| | 09/10/2024 | Maggio, Marie | 7:- 0- d- | | | | \$75.00 |
| | | Contributor address; City; State; | Zip Code | | | | |
| | | | | | | | |
| | | Beaumont, TX 77706 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Retired | | | | | | |
| | | | L | | | | |
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| | MONET | ARY POLITICAL CONTRIBUTIO | SCHEDULE A | | | |
|---|---------------------------|---|------------------------------|---|---|-----------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 63/114 Rpt: 66/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 07/17/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$80.00 |
| _ | Daine in all access | Conroe, TX 77384 | | | | |
| 8 | Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 09/10/2024 | Full name of contributor out-of-state PAC (ID#:_ Maggio, Pearl Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$75.00 |
| | Deire die alle access | Conroe, TX 77384 | | | | |
| | Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/19/2024 | Full name of contributor out-of-state PAC (ID#: Magic Circle Republican Women's Club Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$809.60 |
| | | Houston, TX 77019 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/11/2024 | Full name of contributor out-of-state PAC (ID#:_Maikell Calloway, Judy Contributor address; City; State; Zip Code Odessa, TX 79761 |) | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/16/2024 | Full name of contributor out-of-state PAC (ID#:_Maloney, Darcy Contributor address; City; State; Zip Code San Angelo, TX 76905-7913 |) | | Amount of Contribution (\$) | \$160.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | , | | | | |

| | MONEI | ARY POLITICAL CONTRIBU | | SCHEDULE A1 | | |
|---|---------------------------|---|------------------------------|-------------|--|---------------|
| | The Instru | ction Guide explains how to complete th | nis form. | 1 | tal pages Schedule A1: ch: 64/114 Rpt: 67/188 | |
| 2 | FILER NAME | | | 1 | er ID (Ethics Commission | n Filers) |
| | Texas Feder | ation of Republican Women PAC | | 00 | 054315 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (| (ID#:) | 7 An | nount of Contribution (\$) | #00.00 |
| | 08/30/2024 | | | | | \$80.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
| | | Floresville, TX 78114 | <u> </u> | | | |
| 8 | Principal occu Retired | oation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Date | Full name of contributor out-of-state PAC (| (ID#:) | An | nount of Contribution (\$) | |
| | 07/22/2024 | Manen, Ruby | | .] | | \$80.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | Floresville, TX 78114 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date | Full name of contributor ut-of-state PAC (| (ID#:) | An | nount of Contribution (\$) | |
| | 09/09/2024 | | | | | \$150.00 |
| | | Contributor address; City; State; Zip Code Floresville, TX 78114 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Retired | | Employer (See Instructions | | | |
| | Date | Full name of contributor ut-of-state PAC (| (ID#:) | An | nount of Contribution (\$) | *** |
| | 08/28/2024 | Marchese, Cleo Contributor address; City; State; Zip Code | | | | \$80.00 |
| | | Plano, TX 75023 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | IBCLC, RLC | | Cleomarcheselactation. | .com | | |
| | Date | Full name of contributor ut-of-state PAC (| (ID#:) | An | nount of Contribution (\$) | |
| | 09/20/2024 | Marquardt, Rhonda | | | | \$75.00 |
| | | Contributor address; City; State; Zip Code Brackettville, TX 78832 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Organizer | oalon, 900 tile (908 instructions) | Self | | | |
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| | MONEI | MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDULE A1 | | |
|---|----------------------------|---|-------------------------|-----|---|----------------|---|----------|
| | The Instru | ction Guide explains how | v to complete this fo | orr | n. | 1 | Total pages Schedule A1: Sch: 65/114 Rpt: 68/188 | |
| 2 | FILER NAME | | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Texas Feder | ation of Republican Women F | PAC | | | | 00054315 | |
| 4 | Date 07/02/2024 | 5 Full name of contributorMartin, Elizabeth6 Contributor address; City; S | out-of-state PAC (ID#:_ | |) | 7 | Amount of Contribution (\$) | \$75.00 |
| 8 | Principal occu | Boerne, TX 78006 pation / Job title (See Instructions | 5) | 9 | Employer (See Instructions | | | |
| Ü | Attorney/Rar | | , | ٠ | Self | , | | |
| | Date 08/26/2024 | Full name of contributor Martin, Julie T Contributor address; City; S Austin, TX 78746 | out-of-state PAC (ID#:_ | |) | • | Amount of Contribution (\$) | \$80.00 |
| | Principal occu | pation / Job title (See Instructions | 5) | | Employer (See Instructions | 5) | | |
| | Retired | | | | | | | |
| | Date 09/17/2024 | Full name of contributor Martin, Linda Contributor address; City; S | out-of-state PAC (ID#:_ | |) | • | Amount of Contribution (\$) | \$95.00 |
| | | San Angelo, TX 76904 | | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions | 5) | | Employer (See Instructions | <u>l</u> 5) | | |
| | Date 09/21/2024 | Full name of contributor Mason County RW Contributor address; City; S Mason, TX 76856-6570 | out-of-state PAC (ID#:_ | |) | | Amount of Contribution (\$) | \$101.20 |
| | Principal occu | pation / Job title (See Instructions | 5) | | Employer (See Instructions | 5) | | |
| | Date 07/05/2024 | Full name of contributor Mathews, Susan Contributor address; City; S Houston, TX 77057 | out-of-state PAC (ID#:_ | | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Attorney | pation / Job title (See Instructions | 5) | | Employer (See Instructions Baker Donelson | 5) | | |
| | | | | | | | | |

| | MONEI | MONETARY POLITICAL CONTRIBUTIONS | | | | | E A1 |
|---|----------------------------------|---|--------------------------------------|--|----------|---|-------------|
| | The Instruc | ction Guide explains how | to complete this f | form. | 1 | Total pages Schedule A1: Sch: 66/114 Rpt: 69/188 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Texas Feder | ation of Republican Women F | PAC | | | 00054315 | |
| 4 | Date 09/17/2024 | 5 Full name of contributorMatthews, Joni6 Contributor address; City; St | out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | \$95.00 |
| _ | Discharles | Mason, TX 76856 | N | 10 Familian (0 a last a line) | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions | 5) | 9 Employer (See Instructions | 5) | | |
| | Date 09/17/2024 | Full name of contributor Matthews, Joni Contributor address; City; St | out-of-state PAC (ID#:_ate; Zip Code | | | Amount of Contribution (\$) | \$75.00 |
| | | Mason, TX 76856 | | 1 | <u> </u> | | |
| | Principal occu Retired | pation / Job title (See Instructions | ·) | Employer (See Instructions | 5) | | |
| | Date 08/12/2024 | Full name of contributor McClellan Thee, Lyleann Contributor address; City; St | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$80.00 |
| | | San Angelo, TX 76903 | | | | | |
| | Principal occu merchandise | pation / Job title (See Instructions | ·) | Employer (See Instructions Self | 5) | | |
| | | | | | <u> </u> | A (O trill trill (O) | |
| | Date 08/01/2024 | Full name of contributor McClellan Thee, Lyleann Contributor address; City; Si | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | \$80.00 |
| | | San Angelo, TX 76903 | | | | | |
| | Principal occu Office assista | pation / Job title (See Instructions ant |) | Employer (See Instructions Window Depot | 5) | | |
| | Date 07/16/2024 | Full name of contributor McClintock, Alma Contributor address; City; St | out-of-state PAC (ID#:_ate; Zip Code | | | Amount of Contribution (\$) | \$80.00 |
| | | Rockwall, TX 75032 | | | | | |
| | Principal occu Consultant | pation / Job title (See Instructions | | Employer (See Instructions Self Employed | 5) | | |
| | | | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDUL | E A1 |
|---|----------------------------------|--|---------------------------------------|----------------------------|---|---|-------------|
| | The Instruc | ction Guide explains how to | o complete this for | n. | 1 | Total pages Schedule A1: Sch: 67/114 Rpt: 70/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PA | С | | 3 | Filer ID (Ethics Commission 00054315 | ı Filers) |
| 4 | Date 08/27/2024 | 5 Full name of contributor | | | 7 | Amount of Contribution (\$) | \$80.00 |
| _ | | Georgetown, TX 78628 | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 | Employer (See Instructions |) | | |
| | Date 09/07/2024 | Full name of contributor McDonald, David Contributor address; City; State | | | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | Program Director Atkins | | | , | | | |
| | Date 08/02/2024 | Full name of contributor McDonald, Kate Contributor address; City; State | out-of-state PAC (ID#:e; Zip Code | | | Amount of Contribution (\$) | \$25.00 |
| | | Leander, TX 78641 | | | | | |
| | Principal occu Business Op | pation / Job title (See Instructions) erations | | Employer (See Instructions |) | | |
| | Date 09/20/2024 | Full name of contributor McKenzie, Linda Contributor address; City; State Huntsville, TX 77340 | out-of-state PAC (ID#:e; Zip Code | | | Amount of Contribution (\$) | \$105.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 07/09/2024 | Full name of contributor McLennan Co. RW Contributor address; City; State Woodway, TX 76712 | out-of-state PAC (ID#: e; Zip Code | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | | | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDULE A1 | | |
|---|----------------------------------|---|------------------------------|---|---|-----------|--|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 68/114 Rpt: 71/188 | | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) | |
| 4 | Date 09/05/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ McLennan Co. RW 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$500.00 | |
| _ | | Woodway, TX 76712 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_McLennan Co. RW PAC Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$250.00 | |
| | Dringing! gage | Woodway, TX 76712 | Employer (Co.) Instructions | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_McLennan Co. RW PAC Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$500.00 | |
| | | Woodway, TX 76712 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Mclennan Co RW Contributor address; City; State; Zip Code Woodway, TX 76712 | | | Amount of Contribution (\$) | \$225.00 | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | | |
| | Date 09/23/2024 | Full name of contributor out-of-state PAC (ID#:_Meeks, Barbara Contributor address; City; State; Zip Code League City, TX 77573 | | | Amount of Contribution (\$) | \$95.00 | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | | |
| | | | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A1 | | |
|---|----------------------------------|---|-------------------------|---|----------------|---|-----------|--|
| | The Instruc | ction Guide explains how | v to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 69/114 Rpt: 72/188 | | |
| 2 | FILER NAME Texas Feder | ation of Republican Women | PAC | | 3 | Filer ID (Ethics Commission 00054315 | ı Filers) | |
| 4 | Date 07/29/2024 | 5 Full name of contributor Melancon, Alice6 Contributor address; City; S | out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | \$80.00 | |
| _ | District | Conroe, TX 77385 | -) | D. Faralana (On Jantana) | | | | |
| 8 | Retired | pation / Job title (See Instruction | S) | 9 Employer (See Instructions | 5) | | | |
| | Date 09/26/2024 | Full name of contributor Melancon, Alice Contributor address; City; S | | | | Amount of Contribution (\$) | \$75.00 | |
| | | Conroe, TX 77385 | | | | | | |
| | Principal occu Retired | pation / Job title (See Instruction | s) | Employer (See Instructions | s) | | | |
| | Date 08/12/2024 | Full name of contributor Melsha, Michele Contributor address; City; S | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$80.00 | |
| | | Temple, TX 76504 | | | | | | |
| | Principal occu Office Manag | pation / Job title (See Instruction ger | s) | Employer (See Instructions Salado Museum | s) | | | |
| | Date 07/12/2024 | Full name of contributor Memorial West RW Contributor address; City; S Houston, TX 77055 | |) | • | Amount of Contribution (\$) | \$50.00 | |
| | Principal occu | pation / Job title (See Instruction | s) | Employer (See Instructions | <u>l</u> s) | | | |
| | Date 08/28/2024 | Full name of contributor Metzler, Melony Contributor address; City; S Houston, TX 77084 | out-of-state PAC (ID#:_ | | • | Amount of Contribution (\$) | \$80.00 | |
| | Principal occu Sales | pation / Job title (See Instruction | s) | Employer (See Instructions self | s) | | | |
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| | MONET | ARY POLITICAL CONTRIE | SCHEDULE A | | | | |
|---|---------------------------|---|-------------|----------------------------|----------------|---|-----------|
| | The Instru | ction Guide explains how to comple | te this for | m. | 1 | Total pages Schedule A1: Sch: 70/114 Rpt: 73/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/14/2024 | Full name of contributor out-of-state Meyer, Sharon Contributor address; City; State; Zip Code | |) | 7 | Amount of Contribution (\$) | \$80.00 |
| | | Stockdale, TX 78160 | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 | Employer (See Instructions | 5) | | |
| | Date 07/31/2024 | Miklosh, Corrine | PAC (ID#: |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu | Plano, TX 75093 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> s) | | |
| | Retired | , | | , .,, · (| , | | |
| | Date 07/31/2024 | Full name of contributor out-of-state Miklosh, Corrine Contributor address; City; State; Zip Code | PAC (ID#: |) | | Amount of Contribution (\$) | \$80.00 |
| | | Plano, TX 75093 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 09/22/2024 | Miklosh, Corrine Contributor address; City; State; Zip Code | PAC (ID#: |) | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | Plano, TX 75093 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> 5) | | |
| | Date 08/03/2024 | Full name of contributor out-of-state Mikulenka, Mary Contributor address; City; State; Zip Code Devine, TX 78016 | | | | Amount of Contribution (\$) | \$177.10 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | | | | | | | |

| | MONEI | ARY POLITICAL CONTRIBUTION | | SCHEDULE A1 | | | |
|---|----------------------------|---|---|-------------|---|-----------|--|
| | The Instruc | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 71/114 Rpt: 74/188 | | |
| 2 | FILER NAME | afficient Book Million BAO | | 3 | Filer ID (Ethics Commission | n Filers) | |
| | | ation of Republican Women PAC | | | 00054315 | | |
| 4 | Date 08/26/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$80.00 | |
| | | McKinney, TX 75070 | | | | | |
| 8 | Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | | |
| | Date 08/10/2024 | Full name of contributor out-of-state PAC (ID#:_Milhauser, Mary Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$80.00 | |
| | Dringinal occu | San Angelo, TX 76901 | Employer (See Instructions | <u>''</u> | | | |
| | Retired | pation / Job title (See Instructions) | Employer (See Instructions | >) | | | |
| | Date 08/02/2024 | Full name of contributor out-of-state PAC (ID#:_Miller, Mary Virginia Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$35.00 | |
| | | Huntsville, TX 77342-7543 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | S) | | | |
| | Date 09/02/2024 | Full name of contributor out-of-state PAC (ID#:_Miller, Tiffany Contributor address; City; State; Zip Code Rockwall, TX 75087 | | | Amount of Contribution (\$) | \$190.00 | |
| | Principal occu Attorney | pation / Job title (See Instructions) | Employer (See Instructions Law Offices of David E. | | hlf | | |
| | Date 09/02/2024 | Full name of contributor out-of-state PAC (ID#:_Miller, Tiffany Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$500.00 | |
| | Principal occu Attorney | Rockwall, TX 75087 pation / Job title (See Instructions) | Employer (See Instructions Law Offices Of David E. | | hlf | | |
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| | MONET | ARY POLITICAL CON | | SCHEDULE A1 | | | |
|---|---------------------------|--|----------------------------------|----------------------------|---|---|-----------|
| | The Instru | ction Guide explains how to c | complete this for | n. | 1 | Total pages Schedule A1: Sch: 72/114 Rpt: 75/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | ı Filers) |
| 4 | Date 07/31/2024 | Miller, Virginia | ut-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$480.00 |
| _ | | Huntsville, TX 77342 | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 | Employer (See Instructions |) | | |
| | Date 07/31/2024 | Full name of contributor | |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu | Huntsville, TX 77342 pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Retired | | | | | | |
| | Date 09/10/2024 | Full name of contributor | ut-of-state PAC (ID#: ip Code |) | | Amount of Contribution (\$) | \$75.00 |
| | | Huntsville, TX 77342 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 07/15/2024 | Full name of contributor on the first of the | ut-of-state PAC (ID#: ip Code |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 09/26/2024 | Full name of contributor on Mischefsky, Wanda Contributor address; City; State; Z Alba, TX 75410 | ut-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | | | <u>'</u> | | | | |

| | MONET | ARY POLITICAL CONTRIBUT | | E A1 | | |
|---|---------------------------|---|------------------------------|----------------|---|-----------|
| | The Instru | ction Guide explains how to complete this | s form. | 1 | Total pages Schedule A1: Sch: 73/114 Rpt: 76/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/24/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$80.00 |
| | | Sugar Land, TX 77479 | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Date 07/03/2024 | Full name of contributor out-of-state PAC (IE Mohebtash, Pardis Contributor address; City; State; Zip Code |) #:) | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu | Victoria, TX 77904 pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | CEO | oduon 7 oob uuc (occ mandenons) | Self | 3) | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (IE Montomgery Co RW Contributor address; City; State; Zip Code | D#:) | • | Amount of Contribution (\$) | \$500.00 |
| | | Conroe, TX 77305 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 07/27/2024 | Full name of contributor out-of-state PAC (IE Moore, Anita Contributor address; City; State; Zip Code Mansfield, TX 76063 | D#:) | | Amount of Contribution (\$) | \$160.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | <u>I</u> S) | | |
| | Date 09/15/2024 | Full name of contributor out-of-state PAC (IE Moore, Anita Contributor address; City; State; Zip Code Mansfield, TX 76063 | D#:) | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | | | | | | |

| | MONEI | ARY POLITICAL (| | SCHEDULE A1 | | | |
|---|--------------------------------|---|---|---|---|---|-----------|
| | The Instru | ction Guide explains hov | v to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 74/114 Rpt: 77/188 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | ation of Republican Women | PAC | | L | 00054315 | |
| 4 | Date 09/17/2024 | 5 Full name of contributor Moore, Elaine 6 Contributor address; City; S | out-of-state PAC (ID#:_ tate; Zip Code | | 7 | Amount of Contribution (\$) | \$95.00 |
| 8 | Principal occu | San Angelo, TX 76905 pation / Job title (See Instruction | 5) | Employer (See Instructions | <u>s)</u> | | |
| | Owner | patient 7 000 title (000 met detter) | , | Angelo Awards | ٠, | | |
| | Date 07/26/2024 | Full name of contributor Moore, Ginger Contributor address; City; S San Angelo, TX 76904 | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$80.00 |
| _ | Principal occu | pation / Job title (See Instruction: | s) | Employer (See Instructions | <u> </u> | | |
| | Retired | | | , , , | | | |
| | Date 07/03/2024 | Full name of contributor Morris, Karen Contributor address; City; S | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | \$75.00 |
| | | Jacksonville, TX 75766 | | | | | |
| | Principal occu Business ow | pation / Job title (See Instruction: ner | 5) | Employer (See Instructions Self employed | 5) | | |
| | Date 07/27/2024 | Full name of contributor Morris, Karen Contributor address; City; S Jacksonville, TX 75766 | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$253.75 |
| | Principal occu self employe | pation / Job title (See Instruction d | 5) | Employer (See Instructions | 5) | | |
| | Date 08/28/2024 | Full name of contributor Morris, Karen Contributor address; City; S Jacksonville, TX 75766 | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | \$240.00 |
| | Principal occu Self employe | pation / Job title (See Instruction: ed | 5) | Employer (See Instructions Self employed | 5) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CO | | SCHEDULI | E A1 | | |
|---|-------------------------------|--|----------------------------------|--|-------------|---|-----------|
| | The Instru | ction Guide explains how to | complete this form | n. | 1 | Total pages Schedule A1: Sch: 75/114 Rpt: 78/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | ı Filers) |
| 4 | Date 08/27/2024 | 5 Full name of contributor Morton, Julia6 Contributor address; City; State; | |) | 7 | Amount of Contribution (\$) | \$160.00 |
| 8 | Principal occu | Groesbeck, TX 76642 pation / Job title (See Instructions) | 19 | Employer (See Instructions |) | | |
| | Attorney | patient / cos tiae (coe monactione) | | Self-employed | , | | |
| | Date 09/09/2024 | Full name of contributor Morton, Julia Contributor address; City; State; | out-of-state PAC (ID#:; |) | | Amount of Contribution (\$) | \$75.00 |
| | | Groesbeck, TX 76642 | | | | | |
| | Principal occu Attorney | pation / Job title (See Instructions) | | Employer (See Instructions Self-employed |) | | |
| | Date 07/05/2024 | Full name of contributor Mundy, Amy Contributor address; City; State; | out-of-state PAC (ID#:; Zip Code |) | | Amount of Contribution (\$) | \$75.00 |
| | | Victoria, TX 77904 | | | | | |
| | Principal occu ED Director | pation / Job title (See Instructions) | | Employer (See Instructions Victoria College |) | | |
| | Date 08/20/2024 | Full name of contributor Murphy, Karen Contributor address; City; State; San Antonio, TX 78260 | | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 09/26/2024 | Full name of contributor Myers, Dana Contributor address; City; State; Houston, TX 77265 | out-of-state PAC (ID#:; Zip Code | | | Amount of Contribution (\$) | \$150.00 |
| | Principal occu consultant | pation / Job title (See Instructions) | | Employer (See Instructions self |) | | |
| | | | l | | | | |

| | MONET | MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDUL | SCHEDULE A1 | |
|---|---------------------------|---|-------------------------|-----|----------------------------|----------------|---|-------------|--|
| | The Instruc | ction Guide explains hov | v to complete this fo | orr | n. | 1 | Total pages Schedule A1: Sch: 76/114 Rpt: 79/188 | | |
| 2 | FILER NAME Texas Feder | ation of Republican Women I | PAC | | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) | |
| 4 | Date 09/23/2024 | 5 Full name of contributor Myers, Dana6 Contributor address; City; S | out-of-state PAC (ID#:_ | |) | 7 | Amount of Contribution (\$) | \$190.00 | |
| 8 | Principal occu | Houston, TX 77265 pation / Job title (See Instructions | 5) | 9 | Employer (See Instructions | <u> </u> | | | |
| | consultant | (000 | -, | | self | , | | | |
| | Date 09/20/2024 | Full name of contributor NW Austin RW Contributor address; City; S | | |) | | Amount of Contribution (\$) | \$50.00 | |
| | | Austin, TX 78728 | | | | | | | |
| | Principal occu | pation / Job title (See Instruction: | 5) | | Employer (See Instructions | s) | | | |
| | Date 08/23/2024 | Full name of contributor Nacogdoches Co RW Contributor address; City; S | out-of-state PAC (ID#:_ | |) | | Amount of Contribution (\$) | \$300.00 | |
| | | Nacogdoches, TX 75965 | | | | | | | |
| | Principal occu | pation / Job title (See Instructions | 5) | | Employer (See Instructions | 5) | | | |
| | Date 07/12/2024 | Full name of contributor Nacogdoches Co. RW Contributor address; City; S Nacogdoches, TX 75965 | | |) | • | Amount of Contribution (\$) | \$25.00 | |
| | Principal occu | pation / Job title (See Instructions | 6) | | Employer (See Instructions | <u>l</u> S) | | | |
| | Date 09/20/2024 | Full name of contributor Nacogdoches Co. RW Contributor address; City; S Nacogdoches, TX 75961 | out-of-state PAC (ID#:_ | |) | | Amount of Contribution (\$) | \$50.00 | |
| | Principal occu | pation / Job title (See Instructions | 6) | | Employer (See Instructions | <u>(</u> 6) | | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | | SCHEDULE A1 | | |
|---|-----------------------------|---|------------------------------|-------------|---|-----------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 77/114 Rpt: 80/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/20/2024 | Full name of contributor out-of-state PAC (ID#:_Nacogdoches Co. RW Contributor address; City; State; Zip Code | _ | 7 | Amount of Contribution (\$) | \$75.00 |
| 8 | Principal occu | Nacogdoches, TX 75961 pation / Job title (See Instructions) | 9 Employer (See Instructions | .) | | |
| • | r ilicipai occu | pation / 300 title (See Instituctions) | 2 Employer (See Instructions | ') | | |
| | Date 09/20/2024 | Full name of contributor |) | | Amount of Contribution (\$) | \$190.00 |
| | Principal occu | Austin, TX 78717 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Realtor | | Self | | | |
| | Date 08/02/2024 | Full name of contributor out-of-state PAC (ID#:_ Newton, Karen Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$400.00 |
| | | San Antonio, TX 78209-2049 | | | | |
| | Principal occu Homemaker | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Newton, Karen Contributor address; City; State; Zip Code San Antonio, TX 78209 | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Date 08/19/2024 | Full name of contributor out-of-state PAC (ID#:_Nichol, Christine Contributor address; City; State; Zip Code San Antonio, TX 78216 | | | Amount of Contribution (\$) | \$160.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | | | | | | |

| | MONET | ARY POLITICAL CO | | SCHEDULE A1 | | | |
|---|---------------------------|---|------------------------------------|---|----|---|-----------|
| | The Instru | ction Guide explains how to | complete this forn | n. | 1 | Total pages Schedule A1: Sch: 78/114 Rpt: 81/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/02/2024 | Nick, Cindy | out-of-state PAC (ID#: Zip Code |) | 7 | Amount of Contribution (\$) | \$190.00 |
| | | Tyler, TX 75701 | į | | | | |
| 8 | Principal occu Teacher | pation / Job title (See Instructions) | | Employer (See Instructions Brook Hill School | 5) | | |
| | Date 08/11/2024 | Full name of contributor Norris, Nancy Contributor address; City; State; | out-of-state PAC (ID#: Zip Code |) | | Amount of Contribution (\$) | \$80.00 |
| | Dringing aggr | Salado, TX 76571 | | Employer (See Instructions | | | |
| | Retired | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 07/09/2024 | Full name of contributor North Shore RW Contributor address; City; State; | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$100.00 |
| | | Montgomery, TX 77356-1385 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 08/02/2024 | Full name of contributor Northwest Forest RW Contributor address; City; State; The Woodlands, TX 77375 | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 08/17/2024 | Full name of contributor Northwest Forest Republican Contributor address; City; State; The Woodlands, TX 77375 | | | | Amount of Contribution (\$) | \$303.60 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
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| | MONET | ARY POLITICAL CONTRIBUTI | | SCHEDUL | SCHEDULE A1 | |
|---|-----------------------------|--|------------------------------|---------|---|-----------|
| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 79/114 Rpt: 82/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/19/2024 | Full name of contributor | , | 7 | Amount of Contribution (\$) | \$25.00 |
| _ | 5 | Argyle, TX 76226 | 12.5 | Ĺ | | |
| 8 | homemaker | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 08/19/2024 | Contributor address; City; State; Zip Code | #:) | | Amount of Contribution (\$) | \$10.00 |
| | Principal occu | Argyle, TX 76226 pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | homemaker | | | | | |
| | Date 08/19/2024 | Full name of contributor | #:) | • | Amount of Contribution (\$) | \$25.00 |
| | | Argyle, TX 76226 | | | | |
| | Principal occu homemaker | oation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 08/19/2024 | Full name of contributor out-of-state PAC (ID ONeill, Angela Contributor address; City; State; Zip Code Argyle, TX 76226 | #:) | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu homemaker | oation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 08/20/2024 | Full name of contributor out-of-state PAC (ID ONeill, Angela Contributor address; City; State; Zip Code Argyle, TX 76226 | #:) | | Amount of Contribution (\$) | \$160.00 |
| | Principal occu Homemaker | oation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | | | • | | | |

| | MONET | ARY POLITICAL CONT | SCHEDULE A | | | | |
|---|-------------------------------|---|--------------------|--|----|---|-----------|
| | The Instruc | ction Guide explains how to cor | mplete this for | m. | 1 | Total pages Schedule A1: Sch: 80/114 Rpt: 83/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | ı Filers) |
| 4 | Date 08/20/2024 | ONeill, Angela | of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$250.00 |
| _ | <u> </u> | Argyle, TX 76226 | - la | 5 1 (0 1 : " | | | |
| 8 | Homemaker | oation / Job title (See Instructions) | 9 | Employer (See Instructions | ;) | | |
| | Date 08/30/2024 | Full name of contributor out-contributor out-contributor address; City; State; Zip of | |) | | Amount of Contribution (\$) | \$80.00 |
| | Dringinal occu | Floresville, TX 78114 pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | Retired | Janott 7 Job line (See Instructions) | | Employer (See instructions | ') | | |
| | Date 09/04/2024 | Full name of contributor out-contributor out-contributor address; City; State; Zip (| of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$95.00 |
| | | Leander, TX 78641 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions Retired |) | | |
| | Date 08/30/2024 | Painter, Malissa | of-state PAC (ID#: | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Art Teacher | pation / Job title (See Instructions) | | Employer (See Instructions St. Mary Magdalene Sch | | ol | |
| | Date 09/04/2024 | Full name of contributor out-of pantalion-Parker, Kathryn Contributor address; City; State; Zip of Leander, TX 78641 | of-state PAC (ID#: | | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Sales | pation / Job title (See Instructions) | | Employer (See Instructions Self |) | | |
| | | | • | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | SCHEDULE A1 | | | |
|---|---------------------------|---|--|---|---|-----------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 81/114 Rpt: 84/188 | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/14/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Park Cities Republican Women 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$50.60 |
| | | Dallas, TX 75205 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 07/09/2024 | Full name of contributor out-of-state PAC (ID#:_ Parker County Republican Women Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$278.30 |
| | Principal occu | Weatherford, TX 76087 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/29/2024 | Full name of contributor out-of-state PAC (ID#:_ Parker, Gina Contributor address; City; State; Zip Code Waco, TX 76710 | | | Amount of Contribution (\$) | \$160.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions Gina Parker, Attorney at | | aw | |
| | Date 09/02/2024 | Full name of contributor out-of-state PAC (ID#:_ Parker, Janet Contributor address; City; State; Zip Code Burnet, TX 78611 |) | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/15/2024 | Full name of contributor out-of-state PAC (ID#:_ Payne, Debra Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | SCHEDULE A1 | | | |
|---|---------------------------|---|------------------------------|---|---|---------|
| | The Instruc | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 82/114 Rpt: 85/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | Filers) |
| 4 | Date 08/02/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$35.00 |
| _ | Dringing Loon | Denison, TX 75021 | 0 Employer (See Instructions | | | |
| 8 | Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 09/20/2024 | Full name of contributor | | | Amount of Contribution (\$) | \$25.00 |
| | | Brownwood, TX 76804 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/02/2024 | Full name of contributor out-of-state PAC (ID#:_ Perhach, Sherril Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$75.00 |
| | | Belton, TX 76513 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/11/2024 | Full name of contributor out-of-state PAC (ID#:_ Perhach, Sherril Contributor address; City; State; Zip Code Belton, TX 76513 | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/15/2024 | Full name of contributor out-of-state PAC (ID#:_Pickard, Lessie Contributor address; City; State; Zip Code San Angelo, TX 76904 | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBU | JTION | IS | | SCHEDULI | ■ A1 |
|---|---------------------------|---|----------|----------------------------|----------------|---|-------------|
| | The Instru | ction Guide explains how to complete t | this for | m. | 1 | Total pages Schedule A1: Sch: 83/114 Rpt: 86/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | ı Filers) |
| 4 | Date 09/16/2024 | Full name of contributor out-of-state PAC Plano Republican Women Contributor address; City; State; Zip Code | |) | 7 | Amount of Contribution (\$) | \$25.30 |
| 8 | Principal occu | PLANO, TX 75074 pation / Job title (See Instructions) | 9 | Employer (See Instructions | | | |
| | Date 07/27/2024 | Full name of contributor out-of-state PAC Post, Dani Contributor address; City; State; Zip Code Hempstead, TX 77445 | | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> 5) | | |
| | Date 09/11/2024 | Full name of contributor out-of-state PAC Post, Dani Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu | Hempstead, TX 77445 pation / Job title (See Instructions) | | Employer (See Instructions | j 5) | | |
| | Date 09/09/2024 | Contributor address; City; State; Zip Code | | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | Hempstead, TX 77445 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> ;) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC Post, Dani Contributor address; City; State; Zip Code Hempstead, TX 77445 | |) | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | | | • | | | | |

| | MONEI | ARY POLITICAL (| CONTRIBUTIO | INS | | SCHEDULI | E A1 |
|---|---------------------------|---|-------------------------|------------------------------|----------------|---|-------------|
| | The Instruc | ction Guide explains how | to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 84/114 Rpt: 87/188 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | ation of Republican Women F | PAC | | ┖ | 00054315 | |
| 4 | Date 09/23/2024 | 5 Full name of contributor Potter, Brenda6 Contributor address; City; St | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$25.00 |
| | | Canyon Lake, TX 78133 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions | s) | 9 Employer (See Instructions | S) | | |
| | Insurance Ag | gency Owner | | A2B Insurance Services | S | | |
| | Date 09/14/2024 | Full name of contributor Powell, Trish Contributor address; City; S | out-of-state PAC (ID#: | | - | Amount of Contribution (\$) | \$95.00 |
| | | Cypress, TX 77433 | | | | | |
| | | pation / Job title (See Instructions | s) | Employer (See Instructions | s) | | |
| | Professional Entertainer | | Self | | | | |
| | Date 08/02/2024 | Full name of contributor Preston West RW Contributor address; City; S | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$50.00 |
| | | Dallas, TX 75230 | | | | | |
| | Principal occu | pation / Job title (See Instructions | s) | Employer (See Instructions | <u>I</u> s) | | |
| | Date 07/26/2024 | Full name of contributor Puckett, Katherine Contributor address; City; St | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$35.00 |
| | Principal occu Retired | pation / Job title (See Instructions | 5) | Employer (See Instructions | s) | | |
| | Date 07/04/2024 | Full name of contributor Puckett, Kathryn(Kathy) Contributor address; City; St | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions | s) | Employer (See Instructions | s) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | SCHEDULE A1 | | | |
|---|---------------------------|--|----------------------------|---|---|-----------|
| | The Instru | ction Guide explains how to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 85/114 Rpt: 88/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$160.00 |
| | | Richardson, TX 75081-5328 | | | | |
| 8 | Principal occu RN | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#: RW Denton (TX Red) Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | Denton, TX 76206 | Employer (See Instructions | \ | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#: RW Trinity CO Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$50.00 |
| | | Trinity, TX 75862 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/20/2024 | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/20/2024 | Full name of contributor out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$225.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | SCHEDULE A1 | | | |
|---|---------------------------|--|------------------------------|---|---|-----------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 86/114 Rpt: 89/188 | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/02/2024 | Full name of contributor out-of-state PAC (ID#:_RW of Gregg co. Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$75.00 |
| _ | | Longview, TX 75606 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_RW of Katy Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$425.00 |
| | Principal occu | Katy, TX 77494-3758 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | · | , , | , , , | | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_ RW of Kerr Co. Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$500.00 |
| | | Kerrville, TX 78029 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_RW of Kerr Co. Contributor address; City; State; Zip Code Kerrville, TX 78029 | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/09/2024 | Full name of contributor out-of-state PAC (ID#:_ RW of Trinity Co. Contributor address; City; State; Zip Code Trinity, TX 75862 | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | SCHEDULE A1 | | | |
|---|---------------------------|--|-------------------------------|---|---|-----------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 87/114 Rpt: 90/188 | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/02/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$50.00 |
| _ | | Trinity, TX 75862 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions) |) | | |
| | Date 08/06/2024 | Full name of contributor out-of-state PAC (ID#:_ RW of Trinity Co. Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | Trinity, TX 75862 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | , | | | | |
| | Date 07/09/2024 | Full name of contributor out-of-state PAC (ID#:_ RW of Wood Co. Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$150.00 |
| | | Quitman, TX 75783 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_ RW of Wood Co. PAC Contributor address; City; State; Zip Code Quitman, TX 75783 | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/09/2024 | Full name of contributor out-of-state PAC (ID#:_RW of Yoakum Contributor address; City; State; Zip Code Yoakum, TX 77995 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|---------------------------------|--|--|---|---|-------------|
| | The Instruc | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 88/114 Rpt: 91/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 07/22/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$80.00 |
| _ | Dringing Loon | The Woodlands, TX 77375 | 6 Employer (Coa Instructions | | | |
| 8 | Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 09/03/2024 | Full name of contributor out-of-state PAC (ID#:_ Reagan Legacy Republican Woman Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$75.90 |
| | Principal occu | Mansfield, TX 76063 pation / Job title (See Instructions) | Employer (See Instructions | | | |
| | Fillicipal occu | pation / Job title (See instructions) | Employer (See instructions | , | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID#:_ Red Stiletto Republican Women Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$708.40 |
| | | new braunfels, TX 78130 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/30/2024 | Full name of contributor out-of-state PAC (ID#:_ Reeder, Wanita Contributor address; City; State; Zip Code BELTON, TX 76513-7821 | | | Amount of Contribution (\$) | \$303.60 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/07/2024 | Full name of contributor out-of-state PAC (ID#:_Reeder, Wanita Contributor address; City; State; Zip Code Belton, TX 76513 |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Administrativ | pation / Job title (See Instructions) e Assistant | Employer (See Instructions Bell County |) | | |
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| | MONET | ARY POLITICAL CONTRIBU | SCHEDULE A1 | | | |
|---|---------------------------|---|-------------------------------|---------------|--|-----------|
| | The Instru | ction Guide explains how to complete t | his form. | | pages Schedule A1: 89/114 Rpt: 92/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | ID (Ethics Commission 64315 | n Filers) |
| 4 | Date 07/27/2024 | Full name of contributor | | 7 Amou | unt of Contribution (\$) | \$80.00 |
| _ | Deignaignal | Fairview, TX 75069 | D. Franksian (Con Instruction | | | |
| 8 | Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | is) | | |
| | Date 09/10/2024 | Full name of contributor out-of-state PAC Reeves, Sue Contributor address; City; State; Zip Code | (ID#:) | Amou | unt of Contribution (\$) | \$75.00 |
| | | Fairview, TX 75069 | | <u> </u> | | |
| | Retired | pation / Job title (See Instructions) | Employer (See Instructions | IS) | | |
| | Date 08/31/2024 | Full name of contributor out-of-state PAC Remley, Valerie Jo Contributor address; City; State; Zip Code | (ID#:) | Amou | unt of Contribution (\$) | \$80.00 |
| | | Colleyville, TX 76034 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | ıs) | | |
| | Date 09/11/2024 | Full name of contributor out-of-state PAC Remley, Valerie Jo Contributor address; City; State; Zip Code Colleyville, TX 76034 | (ID#:) | Amou | unt of Contribution (\$) | \$75.00 |
| | Principal occu Retired | oation / Job title (See Instructions) | Employer (See Instructions | is) | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC Reynolds, Daryl Contributor address; City; State; Zip Code Parker, TX 75002 | (ID#:) | Amou | unt of Contribution (\$) | \$160.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | is) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|---------------------------|---|------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this t | form. | 1 | Total pages Schedule A1: Sch: 90/114 Rpt: 93/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/26/2024 | Full name of contributor | _ | 7 | Amount of Contribution (\$) | \$75.00 |
| _ | <u> </u> | Parker, TX 75002 | 10 = 1 | <u></u> | | |
| 8 | Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 09/11/2024 | Full name of contributor out-of-state PAC (ID#:_ Reynolds, Maurine Daryl Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu | Parker, TX 75002 pation / Job title (See Instructions) | Employer (See Instructions | :) | | |
| | Retired | oation / Job title (See instructions) | Employer (See instructions | ·) | | |
| | Date 09/11/2024 | Full name of contributor out-of-state PAC (ID#:_Richardson RW Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$95.00 |
| | | Richardson, TX 75083 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u>. </u> | | |
| | Date 09/11/2024 | Full name of contributor out-of-state PAC (ID#:_Richardson RW Contributor address; City; State; Zip Code Richardson, TX 75083 | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Date 07/02/2024 | Full name of contributor out-of-state PAC (ID#: Richardson Republican Women Contributor address; City; State; Zip Code Richardson, TX 75083 | | | Amount of Contribution (\$) | \$177.10 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
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| | MONET | ARY POLITICAL CONTRIBU | SCHEDULE A1 | | | | |
|---|------------------------------|--|----------------|---|--------|---|-----------|
| | The Instru | ction Guide explains how to complete t | this for | m. | 1 | Total pages Schedule A1: Sch: 91/114 Rpt: 94/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/14/2024 | Full name of contributor out-of-state PAC Richardson Republican Women Contributor address; City; State; Zip Code | • | | 7 | Amount of Contribution (\$) | \$101.20 |
| 8 | Principal occu | Richardson, TX 75083 pation / Job title (See Instructions) | l _a | Employer (See Instructions | ;) | | |
| Ü | i ilicipai occu | pation / 300 title (See instructions) | | Employer (See instructions | ') | | |
| | Date 08/18/2024 | Full name of contributor out-of-state PAC Richmond, Carolyn Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$80.00 |
| | | Meadowlakes, TX 78654 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 08/25/2024 | Full name of contributor out-of-state PAC Ridgway, Diana Dowlearn Contributor address; City; State; Zip Code | C (ID#: |) | | Amount of Contribution (\$) | \$80.00 |
| | | San Antonio, TX 78231 | | | | | |
| | Principal occu Realtor | pation / Job title (See Instructions) | | Employer (See Instructions CB Harper Realtors | 5) | | |
| | Date 07/30/2024 | Full name of contributor out-of-state PAC Ridley, Sara Marie Contributor address; City; State; Zip Code Jacksonville, FL 32258 | |) | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu Consultant | pation / Job title (See Instructions) | | Employer (See Instructions Majority Strategies | 5) | | |
| | Date 07/30/2024 | Full name of contributor out-of-state PAC Ridley, Sara Marie Contributor address; City; State; Zip Code Jacksonville, FL 32258 | C (ID#: |) | | Amount of Contribution (\$) | \$800.00 |
| | Principal occu Consultant | pation / Job title (See Instructions) | | Employer (See Instructions Majority Strategies | s) | | |
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| | MONET | ARY POLITICAL CONTRIBUTIO | SCHEDULE A1 | | | |
|---|---------------------------|---|---|---|---|----------|
| | The Instru | ction Guide explains how to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 92/114 Rpt: 95/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | Filers) |
| 4 | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#: Robertson Co RW Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$250.00 |
| Ω | Principal occu | Franklin, TX 77856 pation / Job title (See Instructions) | 9 Employer (See Instructions | | | |
| 0 | Fillicipal occu | pation / Job title (See Instructions) | Employer (See instructions |) | | |
| | Date 07/27/2024 | Full name of contributor out-of-state PAC (ID#: Robinson, Leann Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 |
| | | Holly Lake Ranch, TX 75765 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#: Robinson, Leann Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$75.00 |
| | | Holly Lake Ranch, TX 75765 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (ID#:Rockwall County Republican Women Contributor address; City; State; Zip Code Rockwall, TX 75087 | | | Amount of Contribution (\$) | \$303.60 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/20/2024 | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Rancher | pation / Job title (See Instructions) | Employer (See Instructions Self Employed |) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | Ν | IS | | SCHEDULE | ■ A1 |
|---|---------------------------|---|----------|---------------------------------|----|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orı | m. | 1 | Total pages Schedule A1: Sch: 93/114 Rpt: 96/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | Filers) |
| 4 | Date 08/04/2024 | Full name of contributor | |) | 7 | Amount of Contribution (\$) | \$80.00 |
| _ | Deignaignal | Harker Heights, TX 76548 | ٦ | Franksian (Cookastustian | | | |
| 8 | Realtor | pation / Job title (See Instructions) | 9 | Employer (See Instructions Self | 5) | | |
| | Date 08/30/2024 | Full name of contributor | |) | • | Amount of Contribution (\$) | \$80.00 |
| | Principal occu | Spring, TX 77386 pation / Job title (See Instructions) | <u> </u> | Employer (See Instructions | s) | | |
| | Sales | , | | PPC | , | | |
| | Date 08/09/2024 | Full name of contributor | |) | | Amount of Contribution (\$) | \$80.00 |
| | | Spring, TX 77386 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 07/04/2024 | Full name of contributor out-of-state PAC (ID#:_SAN ANGELO REPUBLICAN WOMEN Contributor address; City; State; Zip Code SAN ANGELO, TX 76906 | |) | • | Amount of Contribution (\$) | \$151.80 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 08/06/2024 | Full name of contributor out-of-state PAC (ID#:_ SAN ANGELO REPUBLICAN WOMEN Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$75.90 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | | | 1 | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDULE A1 | |
|---|----------------------------------|---|------------------------------|---|---|-----------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 94/114 Rpt: 97/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 07/30/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$328.90 |
| | | Salado, TX 76571 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID#:_ Salado Area Republican Women Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$25.30 |
| | Principal occu | Salado, TX 76571 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID#:_ Salado Area Republican Women Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$75.90 |
| | Principal occu | Salado, TX 76571 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/18/2024 | Full name of contributor out-of-state PAC (ID#: San Angelo Republican Women Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu | San Angelo, TX 76906 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:_ San Antonio RW Contributor address; City; State; Zip Code San Antonio, TX 78216 |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | | SCHEDUL | E A1 | | |
|---|---------------------------|---|-----|------------------------------------|-------------|---|-----------|
| | The Instruc | ction Guide explains how to complete this | for | m. | 1 | Total pages Schedule A1: Sch: 95/114 Rpt: 98/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#: Scott, Karen Contributor address; City; State; Zip Code | | | 7 | Amount of Contribution (\$) | \$95.00 |
| 8 | Principal occu | Fulshear, TX 77441 pation / Job title (See Instructions) | 9 | Employer (See Instructions | | | |
| | Physician As | | | Concentra | , | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#: Seiler, Maria Contributor address; City; State; Zip Code | | | • | Amount of Contribution (\$) | \$80.00 |
| | | New Braunfels, TX 78132 | | | | | |
| | Principal occup | pation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| | Date 08/20/2024 | Full name of contributor out-of-state PAC (ID#: Seiler, Patrick Contributor address; City; State; Zip Code | | | | Amount of Contribution (\$) | \$80.00 |
| | | New Braunfels, TX 78132 | | | | | |
| | Principal occup | pation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| | Date 09/17/2024 | Full name of contributor out-of-state PAC (ID#: Shelburne, La Queta Contributor address; City; State; Zip Code SAN ANGELO, TX 76904 | |) | - | Amount of Contribution (\$) | \$95.00 |
| | Principal occup | oation / Job title (See Instructions) visor | | Employer (See Instructions Self | 5) | | |
| | Date 09/21/2024 | Full name of contributor out-of-state PAC (ID#: Shirley, Joyce Contributor address; City; State; Zip Code Fritch, TX 79036 | | | | Amount of Contribution (\$) | \$570.00 |
| | Principal occu Retired | oation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
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| | MONET | ARY POLITICAL (| CONTRIBUTIO | N | S | | SCHEDUL | E A1 |
|---|---------------------------|--|------------------------|----|---|----------------|---|-------------|
| | The Instruc | ction Guide explains hov | v to complete this fo | rn | n. | 1 | Total pages Schedule A1: Sch: 96/114 Rpt: 99/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women I | PAC | | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 07/04/2024 | 5 Full name of contributor Slagel, Dr. Anne6 Contributor address; City; S | out-of-state PAC (ID#: | | | 7 | Amount of Contribution (\$) | \$75.00 |
| _ | Daine in a language | Richardson, TX 75080 | | | Faralas as (Cara la structions | | | |
| 8 | Chaplain | pation / Job title (See Instructions | (5) | | Employer (See Instructions Chaplain 4 U | 5) | | |
| | Date 07/01/2024 | Full name of contributor Smith County Republican Contributor address; City; S | | |) | | Amount of Contribution (\$) | \$101.20 |
| | Principal occu | Flint, TX 75762 pation / Job title (See Instructions | 3) | | Employer (See Instructions |) | | |
| | i illoipai oooa | patient too tale (eee metrocaen | | | Zimpioyer (eee meadeanis | , | | |
| | Date 08/13/2024 | Full name of contributor Smith County Republican Contributor address; City; S | | | | | Amount of Contribution (\$) | \$75.90 |
| | | Flint, TX 75023-5230 | | | | | | |
| | Principal occu | pation / Job title (See Instructions | 5) | | Employer (See Instructions | 5) | | |
| | Date 09/19/2024 | Full name of contributor Smith County Republican Contributor address; City; S Flint, TX 75023-5230 | | |) | | Amount of Contribution (\$) | \$50.60 |
| | Principal occu | pation / Job title (See Instructions | 5) | | Employer (See Instructions | <u> </u> 5) | | |
| | Date 07/02/2024 | Full name of contributor Smith, Crystal Contributor address; City; S Kerrville, TX 78028 | out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Owner | pation / Job title (See Instructions | 5) | | Employer (See Instructions Billy Gene's Restaurant | 5) | | |
| | | | L | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDULE | E A1 |
|---|---------------------------|--|---|---|--|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 97/114 Rpt: 100/188 | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | ı Filers) |
| 4 | Date 09/03/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$95.00 |
| _ | | Kerrville, TX 78028 | | | | |
| 8 | Owner | pation / Job title (See Instructions) | 9 Employer (See Instructions Billy Gene's Restaurant |) | | |
| | Date 07/04/2024 | Full name of contributor out-of-state PAC (ID#:_ Smith, Karen Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$75.00 |
| | Deinainal assu | Georgetown, TX 78633 | Frankrija (Can Instructions | | | |
| | RN Case Ma | pation / Job title (See Instructions) anager | Employer (See Instructions Tranquility Hospice |) | | |
| | Date 09/23/2024 | Full name of contributor out-of-state PAC (ID#: Sorensen, Genie Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$95.00 |
| | | Austin, TX 78739 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Sorensen, Genie Contributor address; City; State; Zip Code Austin, TX 78739 |) | | Amount of Contribution (\$) | \$95.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Southeast Texas RW Contributor address; City; State; Zip Code Nederland, TX 77627 | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CO | NTRIBUTION | S | | SCHEDULE | A1 |
|---|---------------------------|--|--|---------------------------------|---|--|-----------|
| | The Instru | ction Guide explains how to | complete this form | n. | 1 | Total pages Schedule A1: Sch: 98/114 Rpt: 101/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | Filers) |
| 4 | Date 08/25/2024 | 5 Full name of contributor | | | 7 | Amount of Contribution (\$) | \$80.00 |
| • | Dringing Loggy | Austin, TX 78716 | lo. | Employer (Coo Instructions | | | |
| 8 | Consultant | pation / Job title (See Instructions) | | Employer (See Instructions Self |) | | |
| | Date 09/09/2024 | Full name of contributor | out-of-state PAC (ID#: Zip Code | | | Amount of Contribution (\$) | \$75.00 |
| | Dringing age | Austin, TX 78716 | | Employer (Coo Instructions | | | |
| | Consultant | pation / Job title (See Instructions) | | Employer (See Instructions Self |) | | |
| | Date 07/26/2024 | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$5.00 |
| | | Dallas, TX 75246 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 07/26/2024 | Spitzer, Deborah Contributor address; City; State; 2 | out-of-state PAC (ID#: Zip Code | | | Amount of Contribution (\$) | \$35.00 |
| | Principal occu Retired | Dallas, TX 75246 pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 08/29/2024 | Stanart, Gail | out-of-state PAC (ID#: Zip Code | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | | SCHEDULE A1 | | | |
|---|---------------------------|---|----|---|---------|--|----------|
| | The Instruc | ction Guide explains how to complete this f | or | m. | 1 | Total pages Schedule A1: Sch: 99/114 Rpt: 102/188 | |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | Filers) |
| 4 | Date 08/28/2024 | Full name of contributor out-of-state PAC (ID#:_Stanovich, Janet Contributor address; City; State; Zip Code | |) | 7 | Amount of Contribution (\$) | \$80.00 |
| 8 | Dringinal accu | Jacksonville, TX 75766 pation / Job title (See Instructions) | ۵ | Employer (See Instructions | ·/- | | |
| 0 | | ergency Manager | 9 | By Jupiter | o) | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID#:_ Stanton, Genette Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$160.00 |
| | Dringing Lagra | Montgomery, TX 77356 | _ | Employer (Coo Inchrystians | <u></u> | | |
| | LPC | pation / Job title (See Instructions) | | Employer (See Instructions Genette Stanton Therap | | LLC | |
| | Date 07/09/2024 | Full name of contributor out-of-state PAC (ID#:_Star RW Contributor address; City; State; Zip Code | | | • | Amount of Contribution (\$) | \$100.00 |
| | | Horseshoe Bay, TX 78657 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 09/20/2024 | Full name of contributor out-of-state PAC (ID#:_Star RW Contributor address; City; State; Zip Code Horseshoe Bay, TX 78657 | | | • | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 08/07/2024 | Full name of contributor out-of-state PAC (ID#:_Stinebaugh, Deanna Contributor address; City; State; Zip Code Rockwall, TX 75087 | |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
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| | MONET | ARY POLITICAL CONTRIB | | SCHEDULE A1 | | | |
|---|---------------------------|---|------------|--------------------------------|---|--|-----------|
| | The Instru | ction Guide explains how to complete | e this for | m. | 1 | Total pages Schedule A1: Sch: 100/114 Rpt: 103/18 | 8 |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/13/2024 | Full name of contributor | , |) | 7 | Amount of Contribution (\$) | \$12.00 |
| _ | <u> </u> | Montgomery, TX 77316 | - la | 5 1 (0 1 1 1 | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 | Employer (See Instructions |) | | |
| | Date 09/19/2024 | Full name of contributor out-of-state P Sullivan, Judy Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$190.00 |
| | Deinsinal assu | Caddo Mills, TX 75135 | | Familia var (Caa Inatuustia na | | | |
| | Retired | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 08/12/2024 | Full name of contributor out-of-state P Swarthout, Barbara Contributor address; City; State; Zip Code | PAC (ID#: | | | Amount of Contribution (\$) | \$80.00 |
| | | Salado, TX 76571 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 08/31/2024 | Full name of contributor out-of-state P Swindal, Rebecca Contributor address; City; State; Zip Code Canyon Lake, TX 78133 | , | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 08/22/2024 | Full name of contributor out-of-state P Tarrant Star Republican Women Contributor address; City; State; Zip Code Fort Worth, TX 76112 | | | | Amount of Contribution (\$) | \$75.90 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
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| | MONET | ARY POLITICAL CON | | SCHEDULE A1 | | | |
|---|-----------------------------|---|--------------------|------------------------------|---|---|---------|
| | The Instruc | ction Guide explains how to co | mplete this forr | n. | 1 | Total pages Schedule A1: Sch: 101/114 Rpt: 104/188 | } |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | Filers) |
| 4 | Date 07/30/2024 | 5 Full name of contributor out- Tate, Jill 6 Contributor address; City; State; Zip | |) | 7 | Amount of Contribution (\$) | \$80.00 |
| _ | Deignaignal | Colleyville, TX 76034 | lo. | Frankrijer (Coo kostrustions | | | |
| 8 | Homemaker | pation / Job title (See Instructions) | g | Employer (See Instructions |) | | |
| | Date 09/10/2024 | Full name of contributor out- Tate, Jill Contributor address; City; State; Zip | of-state PAC (ID#: | | | Amount of Contribution (\$) | \$75.00 |
| | Deinsinal assu | Colleyville, TX 76034 | | Frankrian (Cookarationa | | | |
| | homemaker | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 09/24/2024 | Full name of contributor out- Tate, Jill Contributor address; City; State; Zip | of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$95.00 |
| | | Colleyville, TX 76034 | | | | | |
| | Principal occu Homemaker | oation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 08/02/2024 | Full name of contributor out- Taylor Area RW PAC Contributor address; City; State; Zip Thrall, TX 76578 | of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | oation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 08/31/2024 | Teegarden, Gail | of-state PAC (ID#: | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | oation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | | | 1 | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | | SCHEDULE A1 | |
|---|---------------------------|---|------------------------------|-------------|---|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 102/114 Rpt: 105/188 |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission Filers) 00054315 |
| 4 | Date 09/10/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) \$75.00 |
| _ | 5 | Meadowlakes, TX 78654 | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | |
| | Date 09/20/2024 | Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) \$250.00 |
| | Principal occu | San Marcos, TX 78666 pation / Job title (See Instructions) | Employer (See Instructions |) | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Texans for Charles Schwertner Contributor address; City; State; Zip Code Geroetown, TX 78627 | | | Amount of Contribution (\$) \$250.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | |
| | Date 08/02/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Republican VP PAC Contributor address; City; State; Zip Code Austin, TX 78701 | | | Amount of Contribution (\$) \$24,167.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | |
| | Date 07/20/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Strong Republican Women Contributor address; City; State; Zip Code Argyle, TX 76226 | | | Amount of Contribution (\$) \$25.30 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | |
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| | MONET | ARY POLITICAL CONTRIBUTION | | SCHEDULE A1 | | |
|---|---------------------------|--|------------------------------|-------------|--|-----------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 103/114 Rpt: 106/18 | 8 |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/16/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$50.60 |
| | | Argyle, TX 76226 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Strong Republican Women Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$25.30 |
| | Principal occu | Argyle, TX 76226 upation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/02/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Tea Party Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$125.00 |
| | Principal occu | Houston, TX 77095-3727 | Employer (See Instructions |) | | |
| | · ····o.pa ooda | parent out and (ede menastro) | | | | |
| | Date 07/02/2024 | Full name of contributor out-of-state PAC (ID#:_ The Woodlands Republican Women Contributor address; City; State; Zip Code The Woodlands, TX 77389 | | | Amount of Contribution (\$) | \$101.20 |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/15/2024 | Full name of contributor out-of-state PAC (ID#: Thomas, Annette Contributor address; City; State; Zip Code Mason, TX 76856-6570 |) | | Amount of Contribution (\$) | \$202.40 |
| | Principal occu Retired | upation / Job title (See Instructions) | Employer (See Instructions |) | | |
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| | MONET | ARY POLITICAL CONTRIBUTIO | | SCHEDULE | A1 | | |
|---|---------------------------------|---|-----|---------------------------------|----|---|----------|
| | The Instru | ction Guide explains how to complete this fo | ori | m. | 1 | Total pages Schedule A1: Sch: 104/114 Rpt: 107/188 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | Filers) |
| 4 | Date 09/12/2024 | Full name of contributor | | | 7 | Amount of Contribution (\$) | \$75.00 |
| _ | | Richardson, TX 75080 | _ | | | | |
| 8 | Principal occu attorney | pation / Job title (See Instructions) | 9 | Employer (See Instructions self | 5) | | |
| | Date 08/07/2024 | Full name of contributor | | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu | Temple, TX 76502 pation / Job title (See Instructions) | | Employer (See Instructions | ·/ | | |
| | Chaplain | pation / Job title (See Instructions) | | Gentle Transitions Hosp | | 2 | |
| | Date 07/09/2024 | Full name of contributor out-of-state PAC (ID#:_ Top O Texas RW Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$25.00 |
| | | Pampa, TX 79065-3104 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| | Date 07/01/2024 | Full name of contributor out-of-state PAC (ID#:_ Trevino, Toni Contributor address; City; State; Zip Code Rio Grande City, TX 78582 | |) | | Amount of Contribution (\$) | \$253.75 |
| | Principal occu Hospitality | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 07/15/2024 | Full name of contributor out-of-state PAC (ID#:_ Troxclair, Ellen Contributor address; City; State; Zip Code Lakeway, TX 78734 | |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Residential F | pation / Job title (See Instructions) Real Estate | | Employer (See Instructions Self | 5) | | |
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| | MONEI | ARY POLITICAL C | ONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|-----------------------------|--|--|---|----|---|-------------|
| | The Instru | ction Guide explains how | to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 105/114 Rpt: 108/188 | 8 |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | ation of Republican Women P | | | | 00054315 | |
| 4 | Date 09/19/2024 | 5 Full name of contributor Troxclair, Ellen 6 Contributor address; City; Sta | out-of-state PAC (ID#:ate; Zip Code |) | 7 | Amount of Contribution (\$) | \$400.00 |
| Ω | Principal occu | Lakeway, TX 78734 pation / Job title (See Instructions) | To the state of th | Employer (See Instructions | | | |
| Ü | State Repres | | | Troxclair For Texas | , | | |
| | Date 08/31/2024 | Full name of contributor Turner, Kathie Contributor address; City; Sta | out-of-state PAC (ID#: atte; Zip Code | | | Amount of Contribution (\$) | \$80.00 |
| | | Houston, TX 77069 | | - 1 (2 1 1 1 | Ĺ | | |
| | Principal occu Marketing | pation / Job title (See Instructions) | | Employer (See Instructions Self Employed | 5) | | |
| | Date 09/12/2024 | Full name of contributor Vajdak, Rebecca Contributor address; City; Sta | out-of-state PAC (ID#: ate; Zip Code |) | | Amount of Contribution (\$) | \$75.00 |
| | | Temple, TX 76502 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 08/14/2024 | Full name of contributor Val Verde County Republic Contributor address; City; Sta Del Rio, TX 78840 | |) | | Amount of Contribution (\$) | \$25.30 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 09/25/2024 | Full name of contributor Val Verde County Republic Contributor address; City; Sta | | | | Amount of Contribution (\$) | \$25.30 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | | | | | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A1 | | |
|----------------------------------|---|---|------------------------------|-----------------------------|--|-----------|--|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 106/114 Rpt: 109/18 | 8 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) | |
| 4 | Date 07/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Vandermark, Mary Ann Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$80.00 | |
| | | Spring, TX 77379 | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 07/05/2024 Vickery, Sarah Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$75.00 | | |
| | Dayton, TX 77535 Principal occupation / Job title (See Instructions) Employer (See Instruction | | | ·/ | | | |
| | embroidery technician Total Graphics | | ') | | | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 08/23/2024 Village RW Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$200.00 | | |
| | | Houston, TX 77279 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 08/27/2024 WCRW Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$25.30 | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> 5) | | | |
| | Date 08/30/2024 | Full name of contributor out-of-state PAC (ID#:_ Walker County Republican Women Contributor address; City; State; Zip Code Huntsville, TX 77340 |) | | Amount of Contribution (\$) | \$25.30 | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | | |
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| MONETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE A1 | | | |
|---|--|--|------------------------------|-----------------------------|--|-----------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 107/114 Rpt: 110/18 | 8 |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 09/06/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Walker County Republican Women 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$25.30 |
| _ | | Huntsville, TX 77340 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 07/18/2024 | Full name of contributor out-of-state PAC (ID#: Walker, Elizabeth Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | Katy, TX 77494 pation / Job title (See Instructions) | Employer (See Instructions | | | |
| Retired Cocupation 7 300 title (See Instructions) | | , | | | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 08/08/2024 Waller County Republican Women Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$25.30 | |
| | | Waller, TX 77484 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Waller County Republican Women Contributor address; City; State; Zip Code Waller, TX 77484 |) | | Amount of Contribution (\$) | \$101.20 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#: Waller County Republican Women Contributor address; City; State; Zip Code Waller, TX 77484 |) | | Amount of Contribution (\$) | \$50.60 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
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| MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDULE A1 | | | |
|--|--|--|------------|--|--|---|---------|
| | The Instru | ction Guide explains how to complete | e this for | m. | 1 | Total pages Schedule A1: Sch: 108/114 Rpt: 111/188 | 3 |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | Filers) |
| 4 | Date 09/25/2024 | Full name of contributor out-of-state F Waller County Republican Women Contributor address; City; State; Zip Code | · | | 7 | Amount of Contribution (\$) | \$50.60 |
| | | Waller, TX 77484 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 | Employer (See Instructions | s) | | |
| | Date 09/12/2024 | Full name of contributor out-of-state F Ward, Rhonda Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$95.00 |
| | Dringing agg | Nacogdoches, TX 75961 | 1 | Employer (See Instructions | <u></u> | | |
| Principal occupation / Job title (See Instructions) Real Estate Appraiser Employer (See Instructions East Texas Appraisal S | | | ices, Inc | | | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID#:) Ward, Rhonda Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$75.00 | |
| | | Nacogdoches, TX 75961-0814 | | | | | |
| | Principal occu Real Estate | pation / Job title (See Instructions) Appraiser | | Employer (See Instructions East Texas Appraisal Se | ′ | ices Inc | |
| | Date Full name of contributor out-of-state PAC (ID#:) 09/20/2024 West Pearland RW Contributor address; City; State; Zip Code Pearland, TX 77581 | | | Amount of Contribution (\$) | \$75.00 | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u>. </u> | | |
| | Date 08/21/2024 | | | | Amount of Contribution (\$) | \$25.30 | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | | | <u> </u> | | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE A1 | | | |
|----------------------------------|---------------------------|--|-------------------------------|---|--|-----------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 109/114 Rpt: 112/18 | 8 |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 07/09/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$100.00 |
| _ | Dein ein al. a ann | Paducah, TX 79248 | O Frankrije (Ozakasta stiera) | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#:_ White, Frances Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$101.20 |
| | Deinainal assu | Rockwall, TX 75087 | Franklause (Coo la structione | | | |
| | Contractor | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/31/2024 | Full name of contributor out-of-state PAC (ID#:_ Whitehill, Kit Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$80.00 |
| | | Coppell, TX 75019 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 07/31/2024 | Full name of contributor out-of-state PAC (ID#:_ Whitehill, Kit Contributor address; City; State; Zip Code Coppell, TX 75019 |) | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/14/2024 | Full name of contributor out-of-state PAC (ID#:_ Whitehill, Kit Contributor address; City; State; Zip Code Coppell, TX 75019 |) | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE A1 | | | |
|--|---|--|------------------------------|-----------------------------|--|-----------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 110/114 Rpt: 113/18 | 3 |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | | | 7 | Amount of Contribution (\$) | \$80.00 | |
| _ | | Winnsboro, TX 75494 | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| Date Full name of contributor out-of-state PAC (ID#:) 09/07/2024 Williams, Angela Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$95.00 | | |
| | Principal occu | Leander, TX 78641 | Employer (See Instructions | | | |
| Principal occupation / Job title (See Instructions) Justice of the Peace, PCT 2 Employer (See Instructions) Williamson County | | <i>,</i> | | | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 08/27/2024 Williamson, Rebecca Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 | |
| | | Ingram, TX 78025 | | | | |
| | Principal occu Retired | ipation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/12/2024 | Full name of contributor out-of-state PAC (ID#:_ Willis, Anna Contributor address; City; State; Zip Code San Antonio, TX 78223 | | | Amount of Contribution (\$) | \$80.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_Wilson Co. RW Contributor address; City; State; Zip Code Adkins, TX 78101 | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDULE A | | | |
|----------------------------------|---|---|-----------------------|--|-----------------------------|---|-----------|
| | The Instru | ction Guide explains how to c | complete this form | n. | 1 | Total pages Schedule A1: Sch: 111/114 Rpt: 114/188 | 3 |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/28/2024 | Wingo, Cindy | ut-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$160.00 |
| _ | Deignaignal | Schulenburg, TX 78956 | lo- | Frankrije (Cook koste vetice) | | | |
| 8 | Realtor | pation / Job title (See Instructions) | 9 | Employer (See Instructions Self | 5) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 09/05/2024 Wisian, Andra Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$95.00 | | |
| | Boerne, TX 78015 | | | Employer (See Instructions | | | |
| | Principal occupation / Job title (See Instructions) County Commissioner Employer (See Instructions Kendall County | | ') | | | | |
| | Date 09/16/2024 | Full name of contributor out-of-state PAC (ID#:) Wisian, Andra Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$75.00 | |
| | | Boerne, TX 78015 | | | | | |
| | • | pation / Job title (See Instructions) missioner Pct. 2 | | Employer (See Instructions Kendall County |) | | |
| | Date 09/01/2024 | Date Full name of contributor out-of-state PAC (ID#:) | | | Amount of Contribution (\$) | \$253.75 | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 08/28/2024 | | | | Amount of Contribution (\$) | \$80.00 | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | <u>.</u> | | |
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| MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A1 | | |
|--|---|---|-------------------------|--|--|--------------------------------------|-----------|
| | The Instruction Guide explains how to complete this form. | | | 1 | Total pages Schedule A1: Sch: 112/114 Rpt: 115/18 | 8 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women | PAC | | 3 | Filer ID (Ethics Commission 00054315 | n Filers) |
| 4 | Date 08/27/2024 | 5 Full name of contributor Woodroof, Barbara6 Contributor address; City; S | out-of-state PAC (ID#:_ | | 7 | Amount of Contribution (\$) | \$160.00 |
| _ | | Gunter, TX 75058 | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instruction | s) | 9 Employer (See Instructions | 5) | | |
| | Date 09/20/2024 | 09/20/2024 Wright, Susan Contributor address; City; State; Zip Code | | • | Amount of Contribution (\$) | \$190.00 | |
| ARLINGTON, TX 76017 Principal occupation / Job title (See Instructions) Retired Employer (See Instruction | | | <u> </u> | | | | |
| | Date 08/30/2024 | Full name of contributor out-of-state PAC (ID#:) Yannuzzi, Joyce Contributor address; City; State; Zip Code | | • | Amount of Contribution (\$) | \$160.00 | |
| | Dringing aggr | Houston, TX 77046 | 2) | Employer (Coo Instruction | <u></u> | | |
| | District Direc | pation / Job title (See Instruction ctor | 5) | Employer (See Instructions Texas State Senate | >) | | |
| | Date 08/30/2024 | 30/2024 York, Mary Louise Contributor address; City; State; Zip Code | | • | Amount of Contribution (\$) | \$80.00 | |
| | Principal occu Retired | Leon Valley, TX 78238 pation / Job title (See Instruction | s) | Employer (See Instructions | <u>l</u> S) | | |
| | Date 09/16/2024 | Full name of contributor out-of-state PAC (ID#:) Zachary, Linda Contributor address; City; State; Zip Code Houston, TX 77095 | | | Amount of Contribution (\$) | \$25.00 | |
| | Principal occu retired | pation / Job title (See Instruction | s) | Employer (See Instructions | 5) | | |
| | | | | | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A1 | | |
|----------------------------------|--|--|--|-----------------------------|---|---------|--|
| | The Instruc | ction Guide explains how to complete this 1 | orm. | 1 | Total pages Schedule A1: Sch: 113/114 Rpt: 116/188 | 3 | |
| 2 | FILER NAME Texas Feder | ation of Republican Women PAC | | 3 | Filer ID (Ethics Commission 00054315 | Filers) | |
| 4 | Date 08/27/2024 | | | 7 | Amount of Contribution (\$) | \$80.00 | |
| _ | Deireitaal | Temple, TX 76502 | 10 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | |
| 8 | Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | i) | | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 08/02/2024 eisner, amanda Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$80.00 | | |
| | Dringinal occu | georgetown, TX 78633 pation / Job title (See Instructions) | Employer (See Instructions | _ | | | |
| | homemaker | oduon / Job title (See Instructions) | Employer (See instructions | יי | | | |
| | Date 09/09/2024 | Full name of contributor out-of-state PAC (ID#:) eisner, amanda Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$75.00 | |
| | | georgetown, TX 78633 | | | | | |
| | Principal occu homemaker | pation / Job title (See Instructions) | Employer (See Instructions |) | | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#:) heffernan, Mary Contributor address; City; State; Zip Code Austin, TX 78728 | | | Amount of Contribution (\$) | \$75.00 | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | | |
| | Date 07/17/2024 | | | | Amount of Contribution (\$) | \$80.00 | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | () | | | |
| | | | , | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | SCHEDULE A1 |
|---|---|---|------------------------------|---|
| | The Instruction Guide explains how to complete this form. | | | 1 Total pages Schedule A1: Sch: 114/114 Rpt: 117/188 |
| 2 | FILER NAME Texas Feder | ration of Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054315 |
| 4 | Date 09/26/2024 | Full name of contributor | | 7 Amount of Contribution (\$) \$150.00 |
| | | gonzales, TX 78629 | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) |
| | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | |
| Sch: 1/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | Abilene RW |
| 6 Amount (\$) \$600.00 | 7 Payee address; City; State; Zip Code 18 Bay Shore Ct |
| Expenditure from corporate funds | Abilene, TX 79602 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/Ol | |
| Date | Payee name |
| 09/26/2024 | Amazon.com |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$170.76 | 410 Terry Ave N |
| Expenditure from corporate funds | Seattle, WA 98109-5210 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| - | Certificates |
| | Certificates |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held H |
| Date | Payes name |
| 07/31/2024 | Payee name Anedot |
| | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$25.80 | 1920 McKinney Avee |
| Expenditure from | 4th Floor |
| corporate funds | Dallas, TX 75201 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | payment processing fee |
| Complete <u>ONLY</u> if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| | |
| | |
| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

| Contributions/ Donations Made By 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: | |
| Sch: 2/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 08/07/2024 | Anedot |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$160.00 | 1920 McKinney Avee |
| , | 4th Floor |
| Expenditure from | |
| corporate funds | Dallas, TX 75201 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | payment processing fee |
| | paymone processing for |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| | |
| Date | Payee name |
| 08/30/2024 | Anedot |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$31.26 | 1920 McKinney Avee |
| | 4th Floor |
| Expenditure from corporate funds | Dallas, TX 75201 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | payment processing fee |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | 1 |
| Date | Payee name |
| 08/07/2024 | Anedot |
| | |
| Amount (\$) \$12.36 | Payee address; City; State; Zip Code 1920 McKinney Avee |
| ⊅1∠.30 | • |
| Expenditure from | 4th Floor |
| corporate funds | Dallas, TX 75201 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | payment processing fee |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| onpondituro to borioni 0/01 | |
| | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

| Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment | |
|---|---|
| 1 Total pages Schedule F1: | |
| Sch: 3/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 08/14/2024 | Anedot |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$6.90 | 1920 McKinney Avee |
| | 4th Floor |
| Expenditure from corporate funds | Dallas, TX 75201 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | payment processing fee |
| | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held H |
| Date | Payeo namo |
| 08/19/2024 | Payee name Anedot |
| | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$5.70 | 1920 McKinney Avee |
| Expenditure from | 4th Floor |
| corporate funds | Dallas, TX 75201 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | payment processing fee |
| | payment processing rec |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | H |
| Date | Payee name |
| 08/26/2024 | Anedot |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$6.30 | 1920 McKinney Avee |
| | 4th Floor |
| Expenditure from corporate funds | Dallas, TX 75201 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| 2/1 2/15/10/12 | Check if Austin, TX, officeholder living expense |
| | payment processing fee |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| | |
| | |
| | |

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

| al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|--|
| 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Texas Federation of Republican Women PAC 00054315 |
| 5 Payee name |
| Anedot |
| 7 Payee address; City; State; Zip Code |
| 1920 McKinney Avee |
| 4th Floor |
| Dallas, TX 75201 |
| (a) Category (See Categories listed at the top of this schedule) (b) Description |
| Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| payment processing fee |
| |
| Candidate/Officeholder name Office sought Office held OH |
| Payee name |
| Anedot |
| Payee address; City; State; Zip Code |
| 1920 McKinney Avee |
| 4th Floor |
| Dallas, TX 75201 |
| (a) Category (See Categories listed at the top of this schedule) (b) Description |
| Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| payment processing fee |
| |
| Candidate/Officeholder name Office sought Office held |
| DH |
| Payee name |
| Anedot |
| Payee address; City; State; Zip Code |
| 1920 McKinney Avee |
| 4th Floor |
| Dallas, TX 75201 |
| (a) Category (See Categories listed at the top of this schedule) (b) Description |
| Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| |
| payment processing fee |
| payment processing fee |
| Candidate/Officeholder name Office sought Office held |
| |
| Candidate/Officeholder name Office sought Office held |
| |

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

| Candidate/Officeholder/Politica Credit Card Payment | | |
|---|--|------|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission File | ers) |
| Sch: 5/46 Rpt: | Texas Federation of Republican Women PAC 00054315 | · |
| 4 Date | 5 Payee name | |
| 09/23/2024 | Anedot | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| \$9.30 | 1920 McKinney Avee | |
| | 4th Floor | |
| Expenditure from corporate funds | Dallas, TX 75201 | |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| | payment processing fee | |
| | payment processing rec | |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought Office held | |
| experientare to benefit ere. | | |
| Date | Payee name | |
| 07/01/2024 | Angleton RW | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$200.00 | 7925 CR 684 | |
| | | |
| Expenditure from corporate funds | Sweeny, TX 77480 | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| | RPT Convention Comp | |
| | The Following Comp | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| expenditure to benefit C/O | H | |
| Date | Payee name | |
| 07/02/2024 | Authorize.net | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$74.60 | PO Box 8999 | |
| | | |
| Expenditure from corporate funds | San Francisco, CA 94128 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| OF EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. | |
| EXI ENDITORE | Check if Austin, TX, officeholder living expense | |
| | Payment processing fee | |
| Complete CNII V if direct | Candidate/Officeholder name Office sought Office held | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | | |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Cabadula F1: | |
| 1 Total pages Schedule F1: | |
| Sch: 6/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/31/2024 | Authorize.net |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$20.20 | PO Box 8999 |
| | |
| Expenditure from | San Francisco CA 04120 |
| corporate funds | San Francisco, CA 94128 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense Payment processing fee |
| | r ayment processing ree |
| | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| onponditure to belieff 0/0 | ·· |
| Date | Payee name |
| 08/02/2024 | Authorize.net |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$75.10 | PO Box 8999 |
| Ψ10.110 | 1 6 Box 6666 |
| Expenditure from | 0 5 |
| corporate funds | San Francisco, CA 94128 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | Payment processing fee |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| experientare to benefit 6/6 | |
| Date | Payee name |
| 09/03/2024 | Authorize.net |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$75.40 | PO Box 8999 |
| ****** | |
| Expenditure from | Can Francisco CA 04120 |
| corporate funds | San Francisco, CA 94128 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense Payment processing fee |
| | Fayilletit processing lee |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| SAPORALIZATO TO DOTICITE O/O | |
| | |
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| <u> </u> | |

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 (expense a category not listed above)

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | |
| Sch: 7/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | Bandera County RW |
| | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$400.00 | PO Box 734 |
| Expenditure from | |
| corporate funds | Bandera, TX 78003 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Gift/Awards/Memorials Expense |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | |
| Date | Payee name |
| 07/01/2024 | Bay Area RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | PO Box 58103 |
| | |
| Expenditure from corporate funds | Webster, TX 77598 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 07/01/2024 | Baytown RW |
| | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | 3507 Autumn Lane |
| Expenditure from | |
| corporate funds | Baytown tx, TX 77521 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EVENDITURE | Gift/Awards/Memorials Expense |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| | |
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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

| Candidate/Officeholder/Politica Credit Card Payment | 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: 8/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | Blanco County RW |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$400.00 | 687 River View Dr |
| Expenditure from | |
| corporate funds | Johnson City, TX 78636 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | Ta i Convention Comp |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| Date | Payee name |
| 07/31/2024 | Boldway, Jillian |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$383.01 | 1219 Ace Trail |
| , , , , , , | |
| Expenditure from corporate funds | New Braunfels, TX 78132 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Wages |
| | goo |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | i |
| Date | Payee name |
| 08/30/2024 | Boldway, Jillian |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$426.66 | 1219 Ace Trail |
| , | |
| Expenditure from corporate funds | New Braunfels, TX 78132 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor |
| LXI LIBITORE | Check if Austin, TX, officeholder living expense |
| | Wages |
| Complete ONLV if direct | Candidate/Officeholder name Office sought Office held |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | |
| | |
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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

| 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: 9/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | Bright Star RW |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$200.00 | 1124 CR 1107 |
| Expenditure from corporate funds | Sulpher Springs t, TX 75482 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 07/31/2024 | Buono and Associates |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,745.44 | 3267 Bee Cave Rd |
| Ψ=,σ | Ste. 107-#337 |
| Expenditure from | |
| corporate funds | Austin, TX 78746 |
| 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 |
| | Rent |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| Date | Payee name |
| 08/30/2024 | Buono and Associates |
| Amount (\$) | Payee address; City; State; Zip Code |
| | 3267 Bee Cave Rd |
| \$1,745.44 | |
| Expenditure from | Ste. 107-#337 |
| corporate funds | Austin, TX 78746 |
| 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. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | Rent |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| | |
| | |
| | |

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

| Candidate/Officeholder/Politica Credit Card Payment | Al 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: 10/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/05/2024 | Capital One Bank |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$9,979.79 | PO Box 60599 |
| | |
| Expenditure from corporate funds | City of Industry, CA 91716-0599 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Credit Card payment |
| | Ground State paymont |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| experiorities to benefit C/O | |
| Date | Payee name |
| 08/05/2024 | Capital One |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$6,337.78 | PO Box 60599 |
| | |
| Expenditure from corporate funds | City of Industry, CA 91716-0599 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Credit Card Payment Check if travel outside of Texas. Complete Schedule T. |
| | Credit Card payment |
| | Credit Card payment |
| Complete <u>ONLY</u> if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| | |
| Date | Payee name |
| 09/05/2024 | Capital One |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$15,768.06 | PO Box 60599 |
| - Forman 20 | |
| Expenditure from corporate funds | City of Industry, CA 91716-0599 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Credit Card Payment Credit Card Payment Credit Card Payment |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | Credit Card payment |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | Ħ |
| | |
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SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 (outpers extrapply not listed above)

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|---|
| 1 Total pages Schedule F1: | · · · · · · · · · · · · · · · · · · · |
| 1 Total pages Schedule F1: Sch: 11/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| - | · |
| 4 Date | 5 Payee name |
| 07/27/2024 | Chasteen, Kara |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$83.33 | 104 CR 213 |
| | |
| Expenditure from corporate funds | Bertram, TX 78605 |
| 8 PURPOSE | |
| OF | (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | Refund for Tribute to Women Event |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | -i |
| Date | Payee name |
| 07/01/2024 | Cherokee County RW |
| | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$400.00 | PO Box 807 |
| Expenditure from | |
| corporate funds | Jacksonville, TX 75766 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| LA LABITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experience to belieff G/O | • |
| Date | Payee name |
| 07/19/2024 | City of Austin |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$100.58 | PO Box 2267 |
| | |
| Expenditure from corporate funds | Austin, TX 78783-2267 |
| - | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Pental Expanse (b) Description Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | utilities |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| | |
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| | |

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 (onter a extension pot listed above)

| 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: 12/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 08/15/2024 | City of Austin |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$107.80 | PO Box 2267 |
| Evpanditura from | |
| Expenditure from corporate funds | Austin, TX 78783-2267 |
| 8 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 utilities |
| | unnies |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| Date | Payeo namo |
| 09/23/2024 | Payee name City of Austin |
| | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$117.03 | PO Box 2267 |
| Expenditure from | |
| corporate funds | Austin, TX 78783-2267 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense utilities |
| | duntes |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| Date | Davisa nama |
| 07/01/2024 | Payee name Commerce Bank |
| | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,233.05 | PO Box 808009 |
| Expenditure from | |
| corporate funds | Kansas City, MO 64180-8009 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Credit Card Payment Check if travel outside of Texas. Complete Schedule T. |
| | Credit Card payment |
| | Greate Sara payment |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Total pages Schedule F1: Sch: 13/46 Rpt: Texas Federation of Republican Women PAC 5 Payee name Commerce Bank 7 Payee address; City; State; Zip Code PO Box 808009 Expenditure from corporate funds Office Sought Credit Card Payment Credit Card Payment Date 09/05/2024 Amount (\$) Payee address; City; State; Zip Code Credit Card Payment Credit Card Payment Office sought Office Sought Office held Office held Candidate/Officeholder name Office sought Office Sought Office Po Box 414084 Purpose Office Sugent Cardit Card Payment Office Sought Office Sought Office held | Candidate/Officeholder/Politica Credit Card Payment | Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|--|
| Sch: 13/46 Rpt: Texas Federation of Republican Women PAC 00054315 4 Date 07/29/2024 5 Payee name Commerce Bank 6 Amount (8) \$1,975.45 PO Box 808009 Expenditure from corporate funds 8 OURPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office Sught Office PO Box 414084 Date 09/05/2024 PO Box 414084 PO Box 414084 PO Box 61411-4084 PO Box 61411-4084 PO Box 61411-4084 PO Box 414084 Office Sught Off | 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| O7/29/2024 Commerce Bank 6 Amount (\$) 7 Payee address; City; State; Zip Code Expenditure from corporate funds PURPOSE OF EXPENDITURE Payee name Complete funds Payee address; City; State; Zip Code Payee | | |
| Amount (\$) \$1,975.45 PO Box 808009 Expenditure from corporate funds Kansas City, MO 64180-8009 Expenditure from corporate funds Kansas City, MO 64180-8009 PURPOSE CEXPENDITURE Card Payment Credit Card Payment Credit Card Payment Credit Card Payment Credit Card Payment Office sought Office held | 4 Date | 5 Payee name |
| \$1,975.45 PO Box 808009 Expenditure from corporate funds Kansas City, MO 64180-8009 PURPOSE CEXPENDITURE (a) Category (see Categories listed at the top of this schedule) Credit Card Payment Credit Card Pay | 07/29/2024 | Commerce Bank |
| Expenditure from corporate funds 8 | 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| B PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Credit Card payment (b) Description Credit Card payment (c) Check if Austin, TX, officeholder Iving expense Credit Card payment Office held Date 09/05/2024 Amount (\$) Payee address; City; State; Zip Code Expenditure from corporate funds Purpose OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Credit Card payment (b) Description Credit Card payment Office held Date Office held Office held Office held Office held Office held Date Office held Payee name Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | \$1,975.45 | PO Box 808009 |
| B PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Credit Card payment (b) Description Credit Card payment (c) Check if Austin, TX, officeholder Iving expense Credit Card payment Office held Date 09/05/2024 Amount (\$) Payee address; City; State; Zip Code Expenditure from corporate funds Purpose OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Credit Card payment (b) Description Credit Card payment Office held Date Office held Office held Office held Office held Office held Date Office held Payee name Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | | |
| Credit Card Payment | | Kansas City, MO 64180-8009 |
| EXPENDITURE Credit Card Payment Check if Austin, TX, officeholder living expense Credit Card payment Complete QNLY if direct expenditure to benefit C/OH Date 09/05/2024 Amount (\$) Payee name Commerce Bank Amount (\$) Payee address; City; State; Zip Code \$2,999.40 PO Box 414084 Expenditure from corporate funds OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) OF EXPENDITURE Candidate/Officeholder name Office sought (b) Description Check if Austin, TX, officeholder living expense Credit Card Payment Complete ONLY if direct expenditure to benefit C/OH Date 07/01/2024 Payee name Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | | |
| 9 Complete ONLY if direct expenditure to benefit C/OH Date O9/05/2024 Payee name Commerce Bank Amount (\$) Payee address; City; State; Zip Code Expenditure from corporate funds PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office sought Office held Office held Office sought Office held | | orean bara rayment |
| 9 Complete ONLY if direct expenditure to benefit C/OH Date 09/05/2024 Commerce Bank Amount (\$) Payee address; City; State; Zip Code \$2,999.40 PO Box 414084 Expenditure from corporate funds PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Credit Card Payment Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Payee name Complete ONLY if direct expenditure to benefit C/OH Payee name Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | | l ———————————————————————————————————— |
| Date 09/05/2024 Payee name Commerce Bank Amount (\$) Payee address; City; State; Zip Code Expenditure from corporate funds Expenditure from Corporate funds Expenditure from Corporate funds Expenditure from Corporate funds Can Category (See Categories listed at the top of this schedule) Credit Card Payment Credit Card Payment Complete ONLY if direct expenditure to benefit C/OH Date 07/01/2024 Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | | Ground State paymont |
| Date 09/05/2024 Payee name Commerce Bank Amount (\$) Payee address; City; State; Zip Code Expenditure from corporate funds Expenditure from Corporate funds Expenditure from Corporate funds Expenditure from Corporate funds Can Category (See Categories listed at the top of this schedule) Credit Card Payment Credit Card Payment Complete ONLY if direct expenditure to benefit C/OH Date 07/01/2024 Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| O9/05/2024 Commerce Bank Amount (\$) Payee address; City; State; Zip Code \$2,999.40 PO Box 414084 Expenditure from corporate funds PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Credit Card Payment (c) Category (see Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Credit Card Payment (c) Check if Austin, TX, officeholder living expense Credit Card Payment Office sought Office held Date O7/01/2024 Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | expenditure to benefit C/O | н |
| O9/05/2024 Commerce Bank Amount (\$) Payee address; City; State; Zip Code \$2,999.40 PO Box 414084 Expenditure from corporate funds PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Credit Card Payment (c) Category (see Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Credit Card Payment (c) Check if Austin, TX, officeholder living expense Credit Card Payment Office sought Office held Date O7/01/2024 Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | Date | Pavee name |
| Amount (\$) Payee address; City; State; Zip Code \$2,999.40 PO Box 414084 Expenditure from corporate funds Kansas City, MO 64141-4084 PURPOSE OF EXPENDITURE Credit Card Payment Office sought Office held | | |
| \$2,999.40 PO Box 414084 Expenditure from corporate funds Kansas City, MO 64141-4084 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Credit Card Payment Office sought Office held | | |
| Expenditure from corporate funds Ransas City, MO 64141-4084 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Payment Complete ONLY if direct expenditure to benefit C/OH Date Payee name Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | ` ' | |
| PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Payment Complete ONLY if direct expenditure to benefit C/OH Date 07/01/2024 Amount (\$) Payee address; City; State; Zip Code | \$2,999.40 | PO BOX 414004 |
| Credit Card Payment Credit Card Payment Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Payment Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Payee name O7/01/2024 Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | | Kansas City, MO 64141-4084 |
| Complete ONLY if direct expenditure to benefit C/OH Date Only Payee name Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| Complete ONLY if direct expenditure to benefit C/OH Date Only Payee name Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code Credit Card Payment Office sought Office held Office held Office held Office held State; Zip Code | | Circuit Gala i ayinciit |
| Complete ONLY if direct expenditure to benefit C/OH Date Payee name 07/01/2024 Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | | |
| Date Payee name 07/01/2024 Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | | Credit Card Payment |
| Date Payee name 07/01/2024 Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | Complete ONLY if direct | Candidate/Officeholder name Office cought Office hold |
| 07/01/2024 Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | | |
| 07/01/2024 Conner Harrington RW Amount (\$) Payee address; City; State; Zip Code | | |
| Amount (\$) Payee address; City; State; Zip Code | | į |
| | 07/01/2024 | Conner Harrington RW |
| \$200.00 PO Box 865104 | Amount (\$) | Payee address; City; State; Zip Code |
| \$255.00 1 0 BOX 000204 | \$200.00 | PO Box 865104 |
| Expenditure from | Expenditure from | |
| corporate funds Plano, TX 75086 | | Plano, TX 75086 |
| PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description | | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF SYPENDITURE Gift/Awards/Memorials Expense Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. | | Gift/Awards/Memorials Expense |
| Check if Austin, 1X, officeholder living expense | LA LADITORL | |
| RPT Convention Comp | | RPT Convention Comp |
| | 0 1. 6 | |
| Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH | | |
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| | | |

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

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 14/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | Cooke County RW |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$400.00 | 701 E California St |
| Expenditure from | #304 |
| corporate funds | Gainesville, TX 76240 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 07/01/2024 | Coppell RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$400.00 | PO Box 2151 |
| | |
| Expenditure from corporate funds | Coppell, TX 75019 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | Tu T Convention Comp |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Date | Payee name |
| 07/01/2024 | Coryell County RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | 402 S. 24th St |
| | Apt A |
| Expenditure from corporate funds | Gatesville, TX 76528 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| SAPORAMATO TO BOTTOM O/OI | • |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
vertising Expense Event Expense Loan Repayment/Reimbu

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

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
OTHER (other a cottographed listed above)

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | |
| · · | |
| Sch: 15/46 Rpt: | · |
| 4 Date | 5 Payee name |
| 09/03/2024 | Cowell, Ronnye |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$83.33 | 11020 Kemwood Dr |
| | |
| Expenditure from | Houston, TX 77024 |
| corporate funds | 1 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Refund double payment for Tribute to Women |
| | Notatia adable payment for ribute to Welleri |
| Complete CNII V if direct | Candidate/Officeholder name Office sought Office hold |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | |
| Date | Payee name |
| 07/25/2024 | Cowtown RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | 101 Nursery Lane |
| | Ste 236 |
| Expenditure from | Fort Worth, TX 76114 |
| corporate funds | 1 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | Tu i convention comp |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | • |
| · | |
| Date | Payee name |
| 07/01/2024 | Cross Timbers RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | PO Box 323 |
| | |
| Expenditure from corporate funds | Stephenville, TX 76401 |
| | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description Gift/Awards/Memorials Expense |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| | |
| | |
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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

| Candidate/Officeholder/Politica Credit Card Payment | | |
|--|--|------|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Fil | ers) |
| Sch: 16/46 Rpt: | Texas Federation of Republican Women PAC 00054315 | |
| 4 Date | 5 Payee name | |
| 07/01/2024 | Cy-Fair RW | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| \$400.00 | 178-6 Roky Cliff Ct | |
| Expenditure from corporate funds | Houston, TX 77095 | |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| | RPT Convention Comp | |
| | | |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held | |
| Date | Payee name | |
| 07/01/2024 | East Texas RW | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$400.00 | 1117 FM 1635 | |
| Expenditure from corporate funds | Atlanta, TX 75551 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| OF EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| | RPT Convention Comp | |
| | | |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held | |
| Date | Payee name | |
| 07/01/2024 | Fayette County RW | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$400.00 | PO Box 744 | |
| Expenditure from corporate funds | La Grange, TX 78945 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| OF EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. | |
| EXPENDITORE | Check if Austin, TX, officeholder living expense | |
| | RPT Convention Comp | |
| Complete <u>ONLY</u> if direct | Candidate/Officeholder name Office sought Office held | |
| expenditure to benefit C/Ol | · · · · · · · · · · · · · · · · · · · | |
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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

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Cabadula F1: | , |
| Total pages Schedule F1: Sch: 17/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | Federated RW of El Paso |
| 6 Amount (\$) \$400.00 | 7 Payee address; City; State; Zip Code PO Box 960306 |
| Expenditure from corporate funds | El Paso, TX 79996 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Gift/Awards/Memorials Expense |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 08/15/2024 | Fort Bend RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$600.00 | 3019 Arrowhead Dr |
| Expenditure from corporate funds | Sugarland, TX 77479 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 07/01/2024 | Gateway City RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$400.00 | 618 Aleende St |
| , 1531 00 | |
| Expenditure from corporate funds | Laredo, TX 78041 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| SAPORARATO TO BOTTOM O/OI | |
| | |
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| <u> </u> | |

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 (enter a category not listed above)

| Candidate/Officeholder/Politica Credit Card Payment | Al 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: 18/46 Rpt: | Texas Federation of Republican Women PAC 00054315 | |
| 4 Date | 5 Payee name | |
| 07/10/2024 | Georgetown Area RW | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | _ |
| \$600.00 | 1530 Sun City Blvd | |
| | Ste 120 PMB-424 | |
| Expenditure from corporate funds | Georgetown, TX 78633 | |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| OF EXPENDITURE | Gift/Awards/Memorials Expense | |
| | Check if Austin, TX, officeholder living expense | |
| | RPT Convention Comp | |
| | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held H | |
| Date | Davies wares | _ |
| | Payee name Golden Corridor RW | |
| 07/01/2024 | | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$600.00 | PO Box 162 | |
| Evponditure from | | |
| Expenditure from corporate funds | Frisco, TX 75034 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | _ |
| OF EXPENDITURE | Gift/Awards/Memorials Expense | |
| EXPENDITORE | Check if Austin, TX, officeholder living expense | |
| | RPT Convention Comp | |
| | | |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held | |
| experialtare to benefit C/O | | |
| Date | Payee name | |
| 07/01/2024 | Great State Republicans | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$200.00 | PO Box 764 | |
| | | |
| Expenditure from corporate funds | Hallettsville, TX 77964 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | _ |
| OF | Gift/Awards/Memorials Expense Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. | |
| EXPENDITURE | Check if Austin, TX, officeholder living expense | |
| | RPT Convention Comp | |
| | | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| expenditure to benefit C/O | H Control of the Cont | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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 fo

| | The instruction Guide explains now to complete this form. |
|---|--|
| 1 Total pages Schedule F1: Sch: 19/46 Rpt: | 2 FILER NAME Texas Federation of Republican Women PAC 3 Filer ID (Ethics Commission Filers) 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | Grimes County RW |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$600.00 | PO Box 4 |
| Expenditure from corporate funds | Plantersville, TX 77363 |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense RPT Convention Comp |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 07/01/2024 | Harrison County RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | 6372 US Hwy 59 South |
| Expenditure from corporate funds | Marshall, TX 75672 |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense RPT Convention Comp |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 09/25/2024 | Houser, Barbara |
| Amount (\$) \$156.26 | Payee address; City; State; Zip Code 5555 Del Monte Dr |
| Expenditure from corporate funds | Houston, TX 77056 |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Refund Event tickets |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | |

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 Commission Filers) |
| Sch: 20/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | Hutchison County RW |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$200.00 | PO Box 882 |
| | |
| Expenditure from corporate funds | Borger, TX 79008-0882 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| LXI LINDITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/Ol | |
| Date | Davisa nama |
| 07/01/2024 | Payee name Irving RW |
| | |
| Amount (\$) \$400.00 | Payee address; City; State; Zip Code |
| \$400.00 | 812 Murl Dr |
| Expenditure from | L. 1 TV 75000 |
| corporate funds | Irving, TX 75062 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| Date | Payee name |
| 07/01/2024 | Kendall County RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$600.00 | PO Box 1244 |
| | |
| Expenditure from corporate funds | Boerne, TX 78006 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| Complete CNII V if direct | Candidate/Officeholder name Office sought Office held |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | |
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| | |
| | |

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 Commission Filers) |
| Sch: 21/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | Kinney County RW |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$200.00 | PO Box 221 |
| - " | |
| Expenditure from corporate funds | Bracketville, TX 78832 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Data | B |
| Date 07/01/2024 | Payee name |
| 07/01/2024 | Liberty Belles RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | 40 Cherry Hill Dr |
| Expenditure from | |
| corporate funds | Conroe, TX 77304 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| Commission ONLY if dispose | Candidate/Officeholder name Office sought Office held |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | - · · · · · · · · · · · · · · · · · · · |
| | |
| Date | Payee name |
| 07/01/2024 | Lost Pines RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$400.00 | PO Box 575 |
| - Evpanditura from | |
| Expenditure from corporate funds | Bastrop, TX 78602 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experialitie to beliefft C/OI | 1 |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| Credit Card Payment | The Instruction Guide explains how to complete this form. |
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 22/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/23/2024 | Lubbock Area RW |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$600.00 | 6502 Slide Rd |
| | Ste 404 |
| Expenditure from corporate funds | Lubbock, TX 79424 |
| 8 PURPOSE | |
| OF | (a) Category (See Categories listed at the top of this schedule) (b) Description Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | ⊣ |
| Date | Payee name |
| 07/01/2024 | Mason County RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | PO Box 1186 |
| φ200.00 | PO BOX 1100 |
| Expenditure from | |
| corporate funds | Mason, TX 76856 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense RPT Convention Comp |
| | Kr i Convention Comp |
| Complete <u>ONLY</u> if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| | |
| Date | Payee name |
| 07/01/2024 | McCullough County RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | PO Box 1409 |
| Evnenditure from | |
| Expenditure from corporate funds | Brady, TX 76825 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experialitie to beliefft C/O | |
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| | |

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
OTHER (enter a category not listed above)

| Candidate/Officenoider/Politica | The Instruction Guide explains how to complete this form. |
|---|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 23/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | Memorial West RW |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$200.00 | 7418 San Ramon Dr |
| | |
| Expenditure from corporate funds | Houston, TX 77083 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | |
| Date | Payee name |
| 07/08/2024 | Merchant Bankcard |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$570.02 | 8500 Governors Hill Dr |
| | |
| Expenditure from corporate funds | Symmes Township, OH 45249 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| E/11 E1191. C.1. | Check if Austin, TX, officeholder living expense |
| | Payment processing fee |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Experialitate to bettern 5.5. | <u> </u> |
| Date | Payee name |
| 08/06/2024 | Merchant Bankcard |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$556.27 | 8500 Governors Hill Dr |
| | |
| Expenditure from corporate funds | Symmes Township, OH 45249 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | Payment processing fee |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| | |
| | |
| | |

SCHEDULE F1

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

Fees Office Overhead,
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Lenal Services Salaries/Manes/I

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 24/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 09/05/2024 | Merchant Bankcard |
| 6 Amount (\$) \$561.55 | 7 Payee address; City; State; Zip Code 8500 Governors Hill Dr |
| Ψ301.33 | 0000 GOVERNOIS FINI DI |
| Expenditure from corporate funds | Symmes Township, OH 45249 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense Payment processing fee |
| | ayment processing ree |
| Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 07/01/2024 | Mesquite RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$400.00 | 1426 Eastern Hts. |
| Expenditure from corporate funds | Mesquite, TX 75149 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense RPT Convention Comp |
| | Kr i Convention Comp |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 07/29/2024 | Metroplex RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$600.00 | 5604 Edward Dr |
| Expenditure from corporate funds | Arlington, TX 76017 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| | |
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| | |

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 Sch: 25/46 Rpt: | 2 FILER NAME Texas Federation of Republican Women PAC 3 Filer ID (Ethics Commission Filers) 00054315 |
| 4 Date 07/01/2024 | 5 Payee name National Federation of Republican Women |
| 6 Amount (\$) \$3,460.00 | 7 Payee address; City; State; Zip Code 124 North Alfred St |
| Expenditure from corporate funds | Alexandria, VA 22314 |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dues |
| 9 Complete ONLY if direct expenditure to benefit C/6 | Candidate/Officeholder name Office sought Office held OH |
| Date 07/08/2024 | Payee name National Federation of Republican Women |
| Amount (\$) \$1,520.00 | Payee address; City; State; Zip Code 124 North Alfred St |
| Expenditure from corporate funds | Alexandria, VA 22314 |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dues |
| Complete ONLY if direct expenditure to benefit C/ | Candidate/Officeholder name Office sought Office held DH |
| Date 07/29/2024 | Payee name National Federation of Republican Women |
| Amount (\$) \$520.00 | Payee address; City; State; Zip Code 124 North Alfred St |
| Expenditure from corporate funds | Alexandria, VA 22314 |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dues |
| Complete ONLY if direct expenditure to benefit C/G | Candidate/Officeholder name Office sought Office held OH |
| | |

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 (other a cottographed listed above)

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|---|
| 4 7 1 0 1 1 5 | |
| 1 Total pages Schedule F1: | |
| Sch: 26/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 08/05/2024 | National Federation of Republican Women |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$1,360.00 | 124 North Alfred St |
| Ψ1,500.00 | 124 North Allied St |
| Expenditure from | |
| corporate funds | Alexandria, VA 22314 |
| 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. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | Dues |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | H |
| Date | Payee name |
| 08/12/2024 | |
| | National Federation of Republican Women |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$660.00 | 124 North Alfred St |
| | |
| Expenditure from corporate funds | Alexandria, VA 22314 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF OF | |
| EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule 1. Check if Austin, TX, officeholder living expense |
| | Dues |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| | |
| Date | Payee name |
| 08/20/2024 | National Federation of Republican Women |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$3,745.00 | 124 North Alfred St |
| | |
| Expenditure from corporate funds | Alexandria, VA 22314 |
| - | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Dues |
| | |
| Complete CNII V if direct | Candidate/Officeholder name Office cought Office hold |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| , | |
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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

| Candidate/Officenoider/Politica | The Instruction Guide explains how to complete this form. |
|---|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 27/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 08/26/2024 | National Federation of Republican Women |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$2,300.00 | 124 North Alfred St |
| | |
| Expenditure from corporate funds | Alexandria, VA 22314 |
| 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 Dues |
| | Dues |
| | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experience to benefit eye | <u> </u> |
| Date | Payee name |
| 09/06/2024 | National Federation of Republican Women |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$335.00 | 124 North Alfred St |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| Expenditure from corporate funds | Alexandria, VA 22314 |
| 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. |
| EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | Dues |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experialiture to beliefit C/O | <u>'</u> |
| Date | Payee name |
| 09/16/2024 | National Federation of Republican Women |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$580.00 | 124 North Alfred St |
| φοσοίου | |
| Expenditure from corporate funds | Alexandria, VA 22314 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | Dues |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| | |
| | |
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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

| Candidate/Officeholder/Politica Credit Card Payment | ll 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: 28/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 09/23/2024 | National Federation of Republican Women |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$1,480.00 | 124 North Alfred St |
| Expenditure from | |
| corporate funds | Alexandria, VA 22314 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Dues |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | 1 |
| Date | Payee name |
| 08/12/2024 | Navarro County RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | 246 Waterwide Dr |
| | |
| Expenditure from corporate funds | Corsicana, TX 75109 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense RPT Convention Comp |
| | KF i Convention Comp |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Date | Payee name |
| 07/31/2024 | Neff, Cheryl |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$613.67 | 9500 Eagle Knoll Dr |
| φ013.07 | 9300 Eagle Kiloli Di |
| Expenditure from corporate funds | Austin, TX 78717 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | Wages |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | y |
| | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 4 Total marca Cabadula F1. | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| 1 Total pages Schedule F1: Sch: 29/46 Rpt: | 2 FILER NAME Texas Federation of Republican Women PAC 3 Filer ID (Ethics Commission Filers) 00054315 |
| 4 Date | 5 Payee name |
| 07/30/2024 | Neff, Cheryl |
| 0773072024 | Neil, Cheryi |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$4.26 | 9500 Eagle Knoll Dr |
| | |
| Expenditure from | Augtin TV 70717 |
| corporate funds | Austin, TX 78717 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| LAFENDITORE | Check if Austin, TX, officeholder living expense |
| | mileage |
| | |
| Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| D-1- | |
| Date | Payee name |
| 08/30/2024 | Neff, Cheryl |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$427.81 | 9500 Eagle Knoll Dr |
| \$ 121.01 | Cood Lagic Mini Di |
| Expenditure from | |
| corporate funds | Austin, TX 78717 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | Wages |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | |
| | |
| Date | Payee name |
| 07/01/2024 | Northwest Austin RW |
| | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$600.00 | 9500 Eagle Knoll Dr |
| | |
| Expenditure from corporate funds | Austin, TX 78717 |
| • | 1 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Gift/Awards/Memorials Expense |
| | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| 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: 30/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/24/2024 | Nueces County RW |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$600.00 | 4433 Congressional Dr |
| | |
| Expenditure from corporate funds | Corpus Christi, TX 78413 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense RPT Convention Comp |
| | Ta i Convention Comp |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| Date | Davies same |
| | Payee name |
| 07/31/2024 | O'Leary, Louri |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$3,953.32 | 6001 Mountainclimb Dr |
| Expenditure from | |
| corporate funds | Austin, TX 78731 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor |
| _/ | Check if Austin, TX, officeholder living expense |
| | Wages |
| Commission ONII V if dispose | Condidate/Officeholder name Office sought Office hold |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | |
| Date | Payee name |
| 08/30/2024 | O'Leary, Louri |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$3,974.09 | 6001 Mountainclimb Dr |
| Expenditure from | |
| corporate funds | Austin, TX 78731 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor |
| EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | Wages |
| Commission Chill V II alling | Condidate/Officeholder name Office county |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
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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 Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor,

| Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|--|
| 1 Total pages Schedule F1: | · · · · · · · · · · · · · · · · · · · |
| Sch: 31/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 08/28/2024 | O'Leary, Louri |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$3.58 | 6001 Mountainclimb Dr |
| | |
| Expenditure from corporate funds | Austin, TX 78731 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Reimburse Toll charge |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| | |
| Date | Payee name |
| 08/07/2024 | O'Leary, Louri |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$300.00 | 6001 Mountainclimb Dr |
| Expenditure from | |
| corporate funds | Austin, TX 78731 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | Bonus |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experialiture to benefit C/Oi | ' |
| Date | Payee name |
| 07/01/2024 | Panola County RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | 146 Stonegate Dr |
| | |
| Expenditure from corporate funds | Carthage, TX 75633 |
| PURPOSE | |
| OF | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | 1 |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 32/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | Park Cities RW |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$200.00 | Attn: Terry Lynch |
| Expenditure from | 2607 Colby St |
| corporate funds | Dallas, TX 75204 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 07/01/2024 | Pecan Valley RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | PO Box 1011 |
| | |
| Expenditure from corporate funds | Brownwood, TX 76804 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| experience to serious ever | |
| Date | Payee name |
| 08/15/2024 | Plains Capital Bank |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$75.28 | 6565 Hillcrest Ave |
| Expenditure from | |
| corporate funds | Dallas, TX 75205 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense Bank Service Charge |
| | Ballk Service Charge |
| Complete <u>ONLY</u> if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
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| | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 33/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 09/17/2024 | Plains Capital Bank |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$9.43 | 6565 Hillcrest Ave. |
| | |
| Expenditure from corporate funds | Dallas, TX 75205 |
| 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. |
| LXI LINDITORE | Check if Austin, TX, officeholder living expense |
| | bank fee |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Data | |
| Date 09/06/2024 | Payee name Ougliby Logo Products Inc. |
| | Quality Logo Products, Inc. |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$561.78 | 724 N. Highland Ave. |
| Expenditure from | |
| corporate funds | Aurora, IL 60506 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Merchandise |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| Date | Payee name |
| 07/01/2024 | RW of Greater North Texas |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | PO Box 2353 |
| | |
| Expenditure from corporate funds | Frisco, TX 75034 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| 5.150.10.10.10.10.10.10.10.10.10.10.10.10.10 | • |
| | |
| | |

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

| Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 34/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | RW of Gregg County |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$600.00 | PO Box 5685 |
| | |
| Expenditure from corporate funds | Longview, TX 75608 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| LXI LINDITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Data | |
| Date 07/30/2024 | Payee name |
| | RW of Starr County |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | 2426 Mimosa Circle |
| Expenditure from | |
| corporate funds | Rio Grande City, TX 78582 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| Date | Payee name |
| 07/01/2024 | RW of Van Zandt |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$400.00 | 1571 State Hwy 243 |
| | |
| Expenditure from corporate funds | Canton, TX 75103 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| - p - 1.12.12 12 20.10.11 0/01 | |
| | |
| | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

| 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: 35/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | RW of Wood County |
| 6 Amount (\$) \$400.00 | 7 Payee address; City; State; Zip Code 118 CR 2428 |
| Expenditure from corporate funds | Mineola, TX 75773 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense RPT Convention Comp |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 07/01/2024 | Reagan Legacy RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | PO Box 174431 |
| Expenditure from corporate funds | Arlington, TX 76003-4431 |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense RPT Convention Comp |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 08/07/2024 | Reagan Legacy RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | PO Box 174431 |
| Expenditure from corporate funds | Arlington, TX 76003-4431 |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense RPT Convention Comp |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

| Credit Card Payment | The Instruction Guide explains how to complete | this form. |
|----------------------------------|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Sch: 36/46 Rpt: | Texas Federation of Republican Women PAC | 00054315 |
| 4 Date | 5 Payee name | • |
| 07/11/2024 | Republican Women's Club of Katy | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| \$600.00 | 9550 Spring Green Blvd | |
| Expenditure from | Ste 408-122 | |
| corporate funds | Katy, TX 77494 | |
| 8 PURPOSE OF | | pescription |
| EXPENDITURE | Gift/Awards/Memorials Expense | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | R | RPT Convention Comp |
| | | · |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| expenditure to benefit C/OI | 1 | |
| Date | Payee name | |
| 07/01/2024 | Richardson RW | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$400.00 | 434 E Polk | |
| - Evpanditure from | | |
| Expenditure from corporate funds | Richardson, TX 75081 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) D | escription |
| OF EXPENDITURE | Gift/Awards/Memorials Expense | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | L R | PPT Convention Comp |
| | | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| expenditure to benefit C/OI | 1 | |
| Date | Payee name | |
| 07/01/2024 | Robertson County RW | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$400.00 | PO Box 443 | |
| Expenditure from | | |
| corporate funds | Hearne t, TX 77859 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) D | escription |
| OF EXPENDITURE | Gift/Awards/Memorials Expense | Check if travel outside of Texas. Complete Schedule T. |
| | L | Check if Austin, TX, officeholder living expense RPT Convention Comp |
| | | Comonium Comp |
| Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| expenditure to benefit C/OI | 4 | |
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| | | |
| | | |

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Candidate/Officeholder/Politica | |
|----------------------------------|--|
| Credit Card Payment | The Instruction Guide explains how to complete this form. |
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 37/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | Rusk County RW |
| | · · · · · · · · · · · · · · · · · · · |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$200.00 | 303 N Evenside Ave |
| — Forestelland from | |
| Expenditure from corporate funds | Henderson, TX 75653 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Data | |
| Date 07/04/0004 | Payee name |
| 07/01/2024 | Sage Brush RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | PO Box 921 |
| | |
| Expenditure from corporate funds | George West, TX 78022 |
| PURPOSE | |
| OF | (a) Category (See Categories listed at the top of this schedule) (b) Description Cift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| | |
| Date | Payee name |
| 07/01/2024 | Salado Area RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$400.00 | PO Box 373 |
| | |
| Expenditure from corporate funds | Salado, TX 76561 |
| <u> </u> | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description Cift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete <u>ONLY</u> if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| | |
| | |
| | |

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

| 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: 38/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | San Angelo RW |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$400.00 | 2210 Sul Ross St |
| | |
| Expenditure from corporate funds | San Angelo, TX 76904 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense RPT Convention Comp |
| | Kr i Convention Comp |
| O Complete CNII V if divers | Candidate/Officeholder name Office cought Office hold |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | |
| Date | Payee name |
| 07/01/2024 | Sharp Business Systems |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$209.09 | PO Box 121238 |
| | |
| Expenditure from corporate funds | Dallas, TX 75312-1238 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Office Overhead/Rental Expense |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | Equipment rental |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | 4 |
| Date | Payee name |
| 08/01/2024 | Sharp Business Systems |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$209.09 | PO Box 121238 |
| | |
| Expenditure from corporate funds | Dallas, TX 75312-1238 |
| PURPOSE | |
| OF | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | Equipment rental |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| | |
| | |
| | |

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

| Credit Card Payment | The Instruction Guide explains how to complete this form. |
|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 39/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 09/03/2024 | Sharp Business Systems |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$213.59 | PO Box 121238 |
| | |
| Expenditure from corporate funds | Dallas, TX 75312-1238 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Equipment rental |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Data | David and the second se |
| Date 07/01/2024 | Payee name Sholby County PW |
| 07/01/2024 | Shelby County RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | 1112 Spring Branch |
| Expenditure from | |
| corporate funds | Center, TX 75935 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| Complete <u>ONLY</u> if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| | |
| Date | Payee name |
| 07/01/2024 | Sutton County RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | 3420 RR 2596 |
| Expenditure from | |
| corporate funds | Sonora, TX 76950 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| - p | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 40/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | Tarrant Star RW |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$600.00 | 2242 E Loop 820 |
| | · |
| Expenditure from corporate funds | Fort Worth, TX 76112 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | · · |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 08/12/2024 | Texas Cactus Rose RW |
| Amount (¢) | Payee address; City; State; Zip Code |
| Amount (\$) | |
| \$200.00 | 6573 Hermoso del Sol |
| | |
| Expenditure from corporate funds | El Paso, TX 79911 |
| • | I |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | |
| Date | Payee name |
| 09/15/2024 | Texas Secretary of State |
| | |
| Amount (\$) | |
| \$51.35 | 1100 S Congress Ave. |
| | Ste. 1E8 |
| Expenditure from corporate funds | Austin, TX 78704 |
| | 1 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | Trademark Filing |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| | |
| | |
| | |

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | l 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: 41/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/15/2024 | Texas State Comptroller |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$48.19 | 111 East 17th St |
| · | |
| Expenditure from | A |
| corporate funds | Austin, TX 78774 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | sales tax |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Date | Payee name |
| 07/01/2024 | Texas Strong RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$600.00 | PO Box 543 |
| \$600.00 | PO BOX 543 |
| Expenditure from | |
| corporate funds | Argyle, TX 76226 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| LAPENDITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| Date | Payee name |
| 07/01/2024 | Texas Tea Party RW |
| | <u> </u> |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$400.00 | 9514 Ballen David Dr |
| Expenditure from | |
| corporate funds | Spring, TX 77379 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Gift/Awards/Memorials Expense |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| | |
| | |
| | |

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

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | |
| Sch: 42/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/15/2024 | Texas Workforce Commission |
| 6 Amount (\$) \$401.37 | 7 Payee address; City; State; Zip Code PO Bo 149037 |
| Expenditure from corporate funds | Austin, TX 78714-9037 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | unemployment taxes |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held H |
| Date | Payee name |
| 07/31/2024 | United States Treasury |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,756.94 | PO Box 33200 |
| Expenditure from corporate funds | Louisville, KY 40293-2000 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor |
| | Check if Austin, TX, officeholder living expense Payroll taxes |
| | Payroll taxes |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 08/30/2024 | United States Treasury |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,771.46 | PO Box 33200 |
| Expenditure from corporate funds | Louisville, KY 40293-2000 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor |
| | Check if Austin, TX, officeholder living expense |
| | Payroll taxes |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | |
| | |
| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
rtising Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 43/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | Val Verde County RW |
| 6 Amount (\$) \$200.00 | 7 Payee address; City; State; Zip Code107 Agua Azul |
| Ψ200.00 | 107 Agua Azui |
| Expenditure from corporate funds | Del Rio, TX 78840 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 07/01/2024 | Waller County RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$400.00 | PO Box 764 |
| | |
| Expenditure from corporate funds | Waller, TX 77484 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 08/01/2024 | Washington County RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$400.00 | PO Box 723 |
| , ,,,,,,,, | |
| Expenditure from corporate funds | Brenham, TX 77834 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| LA LABITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| | |
| | |
| | |

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

| Credit Card Payment | The Instruction Guide explains how to complete this form. |
|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 44/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | West El Paso RW |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$200.00 | 6240 Dew Dr |
| - 10. | |
| Expenditure from corporate funds | El Paso, TX 79912 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | Ta i convenium comp |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| 5. | |
| Date | Payee name |
| 07/01/2024 | West Pearland RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$400.00 | 8325 Broadway |
| Evpanditura fram | Ste. 202 Box 27 |
| Expenditure from corporate funds | Pearland, TX 77581 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| experientare to benefit 6/6 | <u>'</u> |
| Date | Payee name |
| 07/01/2024 | West Texas Prairie RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | PO Box 802 |
| | |
| Expenditure from corporate funds | Haskell, TX 79521 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | RPT Convention Comp |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| experialitie to belieff C/O | • |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
nse Event Expense Loan Repayment/Reimbu

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

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

| Credit Card Payment | The Instruction Guide explains how to comp | lete this form. |
|--|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Sch: 45/46 Rpt: | Texas Federation of Republican Women PAC | 00054315 |
| 4 Date | 5 Payee name | |
| 07/01/2024 | Western Rolling Plains RW | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| \$200.00 | 1860 CR 166 | |
| Expenditure from | | |
| corporate funds | Childress, TX 79201 | |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) | Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense | Check if travel outside of Texas. Complete Schedule T. |
| LXI LINDITORE | | Check if Austin, TX, officeholder living expense |
| | | RPT Convention Comp |
| O Commists ONLY if direct | Candidate/Officeholder research | Office hold |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought H | Office held |
| · | | |
| Date | Payee name | |
| 07/31/2024 | Whatley, Erica | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$989.07 | 1370 Scarboro Hills Ln | |
| | | |
| Expenditure from corporate funds | Heath, TX 75087 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) | Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor | Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Wages |
| | | wayes |
| Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| expenditure to benefit C/O | | . Office field |
| <u> </u> | | |
| Date | Payee name | |
| 08/30/2024 | Whatley, Erica | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$882.40 | 1370 Scarboro Hills Ln | |
| Expenditure from | | |
| corporate funds | Heath, TX 75087 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) | Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor | Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITORE | | Check if Austin, TX, officeholder living expense |
| | | Wages |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought | Office held |
| experiorations to benefit C/O | · | |
| | | |
| | | |

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

| 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: 46/46 Rpt: | Texas Federation of Republican Women PAC 00054315 |
| 4 Date | 5 Payee name |
| 07/01/2024 | Williamson County RW |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$200.00 | PO Box 342 |
| Expenditure from corporate funds | Round Rock, TX 78680 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense RPT Convention Comp |
| | Re i Convention Comp |
| Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 07/01/2024 | Wise County RW |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$200.00 | PO Box 1819 |
| Expenditure from corporate funds | Boyd, TX 76023 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense RPT Convention Comp |
| | AFT Convention Comp |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| experioritire to benefit C/O | |
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SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| | | The Inst | ruction Guide explains how | to complete | this form. | (1 11 11 11 11 11 11 11 11 11 11 11 11 1 | , | , |
|----------|---|---|--------------------------------|------------------------------|---|--|-----------|--------------|
| 1 | Total pages Schedule F4: | 2 FILER NAME | | | | 3 Filer ID (Ethic | cs Commis | sion Filers) |
| | Sch: 1/19 Rpt: | Texas Federation o | f Republican Women P | PAC | | 00054315 | | |
| 4 | CREDIT CARD ISSUER | | ncial institution al One | EXPEN | OF UNITEMIZED DITURES SED TO A CREDIT | \$ | | |
| 6 | PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | Paid | | |
| | Expenditure from corporate funds | \$31.69 | 07/03/2024 | | | | | |
| 7 | PAYEE | (a) Payee name Office Depot | | | th Military Trail | City, | State, | Zip Code |
| Ļ | | (-) O-t | | | ton, FL 33496 | | | |
| 8 | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Office Overhead/Rent | | (b) Descrip | | | | |
| | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | • | Check if Austin, TX, | officeholder living exp | ense | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | | Office held | | |
| | PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | Paid | | |
| | Expenditure from corporate funds | \$6.76 | 07/04/2024 | | | | | |
| | PAYEE | (a) Payee name | | (b) Payee | address; | City, | State, | Zip Code |
| | | Shippo | | 731 Mark #200 San Fran | ket St ucisco, CA 94103 | | | |
| | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Office Overhead/Rent | | (b) Descrip postage | otion | | | |
| | Non-Political | (C) Check if travel outside | of Texas. Complete Schedule T. | 1 | Check if Austin, TX, | officeholder living exp | ense | |
| е | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | | Office held | | |
| | PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | Paid | | |
| | Expenditure from corporate funds | \$1,995.06 | 07/10/2024 | | | | | |
| | PAYEE | (a) Payee name | • | (b) Payee | address; | City, | State, | Zip Code |
| | | Constant Contact | | Ste. 329 | pelo Road , MA 02451 | | | |
| | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Office Overhead/Rent | | (b) Descrip | | | | |
| 1 | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | 1 | Check if Austin, TX, | officeholder living exp | ense | |
| H | Complete ONLY if direct | Candidate/Officeholder | · | e sought | <u> </u> | Office held | | |
| e | expenditure to benefit C/OH | | | | | | | |
| | | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| | The Inst | ruction Guide explains how | to complete th | nis form. | | | |
|----------------------------------|--|--------------------------------|----------------|--|---------------------------------------|--------|----------|
| 1 Total pages Schedule F4: | 2 FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) | | |
| Sch: 2/19 Rpt: | Texas Federation o | f Republican Women P | AC | | 00054315 | | |
| 4 CREDIT CARD ISSUER | | ncial institution revious | EXPEND | OF UNITEMIZED DITURES ED TO A CREDIT | \$ | | |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issuer | Paid | | |
| Expenditure from corporate funds | \$44.36 | 07/11/2024 | | | | | |
| 7 PAYEE | (a) Payee name | • | (b) Payee a | address; | City, | State, | Zip Code |
| | Office Depot | | 6600 Nort | h Military Trail | | | |
| | | | | on, FL 33496 | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this echodula) | (b) Descript | | | | |
| X Political | Office Overhead/Rent | • | office sup | piles | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living expe | ense | |
| 9 Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | | Office held | | |
| expenditure to benefit C/OH | | - | _ | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issuer | Paid | | |
| Expenditure from corporate funds | \$25.98 | 07/15/2024 | | | | | |
| PAYEE | (a) Payee name | | (b) Payee a | address; | City, | State, | Zip Code |
| | Intuit | | 3632 Mari | ine Way | | | |
| | | | | view, CA 94043 | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schedule) | (b) Descript | | | | |
| X Political | Fees | | payron pro | occooning | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living expe | ense | |
| Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | | Office held | | |
| expenditure to benefit C/OH | | | _ | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issuer | Paid | | |
| Expenditure from corporate funds | \$1,020.00 | 07/16/2024 | | | | | |
| PAYEE | (a) Payee name | • | (b) Payee a | address; | City, | State, | Zip Code |
| | Noticed Foderation | a of | 124 North | Alfred St | | | |
| | National Federatior | 1 OT | | | | | |
| | | | | a, VA 22314 | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this echodula) | (b) Descript | tion | | | |
| <u></u> | Fees | or and soriculary | dues | | | | |
| X Political | | | | | | | |
| Non-Political | \(\frac{1}{2}\) | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living expe | ense | |
| Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | | Office held | | |
| expenditure to benefit C/OH | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

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)

and the state of t

| | The Inst | ruction Guide explains how | to complete t | his form. | | | | |
|----------------------------------|--|--------------------------------|---------------|--|-------------------------|---------------------------------------|----------|--|
| 1 Total pages Schedule F4: | 2 FILER NAME | | | | 3 Filer ID (Ethio | 3 Filer ID (Ethics Commission Filers) | | |
| Sch: 3/19 Rpt: | Texas Federation o | f Republican Women F | PAC | | 00054315 | | | |
| 4 CREDIT CARD ISSUER | | ncial institution revious | EXPEN | OF UNITEMIZED DITURES ED TO A CREDIT | \$ | | | |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | r Paid | | | |
| Expenditure from corporate funds | \$200.00 | 07/16/2024 | | | | | | |
| 7 PAYEE | (a) Payee name | | (b) Payee a | address; | City, | State, | Zip Code | |
| | National Federatior | ı of | 124 North | Alfred St | | | | |
| | | | | a, VA 22314 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this echodulo) | (b) Descrip | tion | | | | |
| X Political | Fees | or this serieure) | dues | | | | | |
| Non-Political | (C) Check if travel outside | of Texas. Complete Schedule T. | . [| Check if Austin, TX, | officeholder living exp | ense | | |
| 9 Complete ONLY if direct | Candidate/Officeholder | name Offic | e sought | | Office held | | | |
| expenditure to benefit C/OH | | | | | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | r Paid | | | |
| Expenditure from corporate funds | \$1,020.00 | 07/16/2024 | | | | | | |
| PAYEE | (a) Payee name | | (b) Payee a | address; | City, | State, | Zip Code | |
| | National Federatior | ı of | 124 North | Alfred St | | | | |
| | | | Alexandri | a, VA 22314 | | | | |
| PURPOSE OF | (a) Category | -£46:bdul-\ | (b) Descrip | tion | | | | |
| EXPENDITURE | (See Categories listed at the top | of this schedule) | dues | | | | | |
| X Political | | | | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | [| Check if Austin, TX, | officeholder living exp | ense | | |
| Complete ONLY if direct | Candidate/Officeholder | name Offic | e sought | | Office held | | | |
| expenditure to benefit C/OH | | | | | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | r Paid | | | |
| Expenditure from corporate funds | \$24.89 | 07/22/2024 | | | | | | |
| PAYEE | (a) Payee name | | (b) Payee a | address; | City, | State, | Zip Code | |
| | Adaha Cyatama | | 345 Park | Avenue | | | | |
| | Adobe Systems | | | | | | | |
| | | | | , CA 95110 | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schedule) | (b) Descrip | tion | | | | |
| | Office Overhead/Rent | * | software | | | | | |
| X Political | | | | | | | | |
| Non-Political | · · · · · · · · · · · · · · · · · · · | of Texas. Complete Schedule T. | [| Check if Austin, TX, | officeholder living exp | ense | | |
| Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | | Office held | | | |
| expenditure to benefit C/OH | | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| Spectrum Spectrum Spectrum St. George, UT 84770 (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Office sought Office osught Office held Spring, TX 77389 PURPOSE OF EXPENDITURE A) Political Non-Political Non-Po | | The Instruction Guide explains how to complete this form. | | | | | | |
|---|-----------------------------|---|--------------------------------|------------------|----------------------|---------------------------------------|--------|----------|
| A CREDIT CARD ISSUER | 1 Total pages Schedule F4: | 2 FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) | | |
| SSUER See previous CARRGED TO A CREDIT CARRO GAMENT A Amount Charged S110.57 B PAYEE (a) Payee name Spectrum (b) Payee address; St. George Blvd. St. George, UT 84770 St. George, UT 84770 St. George, UT 84770 PAYEE (a) Catagony Sectrum (b) Payee address; City, State, Zip Code Spectrum St. George, UT 84770 St. George, UT 84770 St. George, UT 84770 (c) Description Internet (c) Description Internet (c) Description Internet (d) Description Internet (d) Description Internet (d) Description Internet (e) Description Internet (file Overhead/Rental Expense (e) Complete ONLY if direct Expenditure to benefit C/OH PAYMENT (a) Amount Charged S7.57 (b) Date of Charge (c) Date(s) Credit Card Issuer Paid (d) Amount Charged S7.57 (d) Category Spring, TX 77389 (e) Category Spring, TX 77389 (e) Description Internet (file beld (e) Date of Charge S7.57 (file Overhead/Rental Expense (b) Payee address; City, State, Zip Code Spring, TX 77389 (b) Description Internet (c) Date(s) Credit Card Issuer Paid (d) Description Internet (e) Description Internet (internet (internet Office Overhead/Rental Expense (b) Payee address; City, State, Zip Code Spring, TX 77389 (b) Description Internet (c) Description Internet (d) Description Internet (d) Description Internet (d) Description Internet (e) Description Internet (e) Date(s) Credit Card Issuer Paid (internet) | Sch: 4/19 Rpt: | Texas Federation o | f Republican Women P | PAC | | 00054315 | | |
| Spectrum Silo.57 O8/10/2024 Spectrum Spectrum Call Payee name Spectrum Spectrum State, Zip Code | | | | EXPEND CHARGE | ITURES | \$ | | |
| PAYEE (a) Payee name (b) Payee address; City, State, Zip Code | 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issuer | Paid | | |
| Spectrum Spectr | | \$110.57 | 08/10/2024 | | | | | |
| Spectrum Spectrum St. George, UT 84770 | 7 PAYEE | (a) Payee name | | (b) Payee a | ddress; | City, | State, | Zip Code |
| B PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) (C) | | Spectrum | | | • | | | |
| EXPENDITURE Siese Categories listed at the top of this schedule Office Overhead/Rental Expense Internet Office Non-Political Office Overhead/Rental Expense Office Sought Office held | | () 2 | | | | | | |
| Political Office Overhead/Rental Expense Internet Office Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | | of this schedule) | 1 | ion | | | |
| 9 Complete QNLY if direct expenditure to benefit C/OH PAYMENT QN (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name (b) Payee address; City, State, Zip Code (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name (b) Payee address; City, State, Zip Code (c) Description (c) Descripti | _ | 1 | | internet | | | | |
| expenditure to benefit C/OH PAYMENT Sependiture from corporate funds \$7.57 \$0 pate of Charge \$7.57 \$0 pate of Charge \$7.57 \$0 pate of Charge \$0 pate of Charge \$1.000 pate of Char | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living expe | ense | |
| PAYMENT Expenditure from corporate funds S7.57 | | Candidate/Officeholder | name Office | e sought | | Office held | | |
| Expenditure from corporate funds PAYEE | expenditure to benefit C/OH | | | | | | | |
| PAYEE (a) Payee name (b) Payee address; City, State, Zip Code (a) Category (b) Description (c) Expenditure (d) Category (d) Category (d) Check if travel outside of Texas. Complete Schedule T. (expenditure from corporate funds PAYEE (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid (d) Payee address; City, State, Zip Code (d) Description (expenditure from corporate funds (expenditure from corporate funds (fice Depot (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid (b) Payee address; City, State, Zip Code (c) Date(s) Credit Card Issuer Paid (d) Payee address; City, State, Zip Code (expenditure from corporate funds (b) Payee address; City, State, Zip Code (fice Depot (g) Category (g) Cate | l <u> </u> | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issuer | Paid | | |
| PURPOSE OF EXPENDITURE X Political Office Overhead/Rental Expense (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description printer ink (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | \$7.57 | 07/22/2024 | | | | | |
| PURPOSE OF EXPENDITURE A Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense | PAYEE | (a) Payee name | | (b) Payee a | ddress; | City, | State, | Zip Code |
| PURPOSE OF EXPENDITURE | | HP | | 10300 Ene | ergy Drive | | | |
| See Categories listed at the top of this schedule Office Overhead/Rental Expense Printer ink | | | | Spring, TX | 77389 | | | |
| Office Overhead/Rental Expense Office Overhead/Rental Expense (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct expenditure to benefit C/OH PAYMENT Expenditure from corporate funds (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 6600 North Military Trail Office Depot Boca Raton, FL 33496 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Boca Raton, FL 33496 (b) Description Office supplies (c) Check if Laustin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office outplies | | 1 ' ' ' | of this schedule) | | ion | | | |
| Complete ONLY if direct expenditure to benefit C/OH PAYMENT Sependiture from corporate funds PAYEE (a) Payee name Office Depot Office Depot (b) Payee address; City, State, Zip Code 6600 North Military Trail Boca Raton, FL 33496 PURPOSE OF EXPENDITURE X Political Non-Political Non-Political Complete ONLY if direct Candidate/Officeholder name Office Depot Candidate/Officeholder name Office sought Office sought Office Sought Office Sought Office held Office held Office held Office held | l <u> </u> | | | printer ink | | | | |
| expenditure to benefit C/OH PAYMENT Expenditure from corporate funds (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 6600 North Military Trail Boca Raton, FL 33496 PURPOSE OF EXPENDITURE See Categories listed at the top of this schedule) Office Overhead/Rental Expense Non-Political Non-Political Complete ONLY if direct Candidate/Officeholder name Coffice Sought Office held | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Γ | Check if Austin, TX, | officeholder living expe | ense | |
| PAYMENT Expenditure from corporate funds (a) Amount Charged \$67.48 07/22/2024 (b) Date of Charge 07/22/2024 (c) Date(s) Credit Card Issuer Paid (d) Payee address; City, State, Zip Code 6600 North Military Trail Boca Raton, FL 33496 PURPOSE OF EXPENDITURE X Political Non-Political Non-Political Non-Political Complete ONLY if direct Candidate/Officeholder name Office sought Office held | Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | | Office held | | |
| Expenditure from corporate funds \$67.48 07/22/2024 PAYEE (a) Payee name Office Depot Office Depot Boca Raton, FL 33496 PURPOSE OF EXPENDITURE X Political Non-Political Non-Political Complete ONLY if direct Candidate/Officeholder name \$67.48 07/22/2024 (b) Payee address; City, State, Zip Code 6600 North Military Trail (b) Payee address; City, State, Zip Code 6600 North Military Trail (b) Description (b) Description (c) Description (d) Category (see Categories listed at the top of this schedule) Office Supplies (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Office sought Office held | expenditure to benefit C/OH | | | | | | | |
| PAYEE (a) Payee name Office Depot (b) Payee address; City, State, Zip Code 6600 North Military Trail Boca Raton, FL 33496 PURPOSE OF EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (c) Check if travel outside of Texas. Complete Schedule T. Complete ONLY if direct Candidate/Officeholder name (b) Payee address; City, State, Zip Code (600 North Military Trail (b) Payee address; (ib) Description office supplies (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held | PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issuer | Paid | | |
| Office Depot Office Depot Boca Raton, FL 33496 PURPOSE OF (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Non-Political Non-Political Complete ONLY if direct Office Depot Boca Raton, FL 33496 (b) Description office supplies (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office sought Office held | | \$67.48 | 07/22/2024 | | | | | |
| Office Depot Boca Raton, FL 33496 PURPOSE OF EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held | PAYEE | (a) Payee name | | (b) Payee a | ddress; | City, | State, | Zip Code |
| PURPOSE OF EXPENDITURE X Political Candidate/Officeholder name Candidate/Office hold Candidate/Office hold Candidate/Office Candidate/Office hold Candidate/Office hold Candidate/Office Candidate/Office hold Candidate/Offi | | Office Denet | | 6600 Nort | h Military Trail | | | |
| PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description office supplies (b) Description office supplies (c) Check if travel outside of Texas. Complete Schedule T. Complete ONLY if direct Candidate/Officeholder name Office sought Office held | | Опісе рерот | | | | | | |
| EXPENDITURE See Categories listed at the top of this schedule) Office Overhead/Rental Expense Office supplies | | | | | | | | |
| X Political Office Overhead/Rental Expense Office Supplies Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held | | | of this echodulo) | | | | | |
| Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held | l <u> </u> | | | office supp | olies | | | |
| Complete ONLY if direct Candidate/Officeholder name Office sought Office held | I = | | • | | | | | |
| | Non-Political | \(\frac{1}{2}\) | · | | Check if Austin, TX, | | ense | |
| expenditure to benefit C/OH | | Candidate/Officeholder | name Office | e sought | | Office held | | |
| | expenditure to benefit C/OH | <u> </u> | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| | The Inst | ruction Guide explains how | to complete this form. | | | |
|---|--|--------------------------------|--|--------------------------------|---------------|--|
| 1 Total pages Schedule F4: | 2 FILER NAME | 3 Filer ID (Ethics Cor | nmission Filers) | | | |
| Sch: 5/19 Rpt: | Texas Federation o | of Republican Women F | PAC | 00054315 | | |
| 4 CREDIT CARD ISSUER | | ncial institution revious | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDITORNO | \$ | | |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issue | er Paid | | |
| Expenditure from corporate funds | \$9,729.11 | 07/26/2024 | | | | |
| 7 PAYEE | (a) Payee name | | (b) Payee address; | City, Sta | ate, Zip Code | |
| | Courtyard by Marrio | ott | 16100 Impact Way | | | |
| | | | Pflugerville, TX 78660 | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schodulo) | (b) Description | | | |
| X Political | Event Expense | of this schedule) | Q3 Board Meeting | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, TX | K, officeholder living expense | | |
| 9 Complete ONLY if direct | Candidate/Officeholder | r name Offic | e sought | Office held | | |
| expenditure to benefit C/OH | | - | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issue | er Paid | | |
| Expenditure from corporate funds | \$2,000.00 | 07/26/2024 | | | | |
| PAYEE | (a) Payee name | • | (b) Payee address; | City, St | ate, Zip Code | |
| | Courtyard by Marrio | ott | 16100 Impact Way | | | |
| | County and by Marin | | Pflugerville, TX 78660 | | | |
| PURPOSE OF | (a) Category | (1) | (b) Description | | | |
| EXPENDITURE | (See Categories listed at the top Event Expense | of this schedule) | Q3 Board Meeting | | | |
| X Political | · | | | | | |
| Non-Political | ` | of Texas. Complete Schedule T. | _ | K, officeholder living expense | | |
| Complete ONLY if direct | Candidate/Officeholder | r name Offic | e sought | Office held | | |
| expenditure to benefit C/OH | | 1 | 1 | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issue | er Paid | | |
| Expenditure from corporate funds | \$165.97 | 07/29/2024 | | | | |
| PAYEE | (a) Payee name | • | (b) Payee address; | City, Sta | ate, Zip Code | |
| | Countries and love Manusi | -# | 16100 Impact Way | | | |
| | Courtyard by Marrio | Ott | | | | |
| | | | Pflugerville, TX 78660 | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schodulo) | (b) Description | | | |
| | Travel In District | of this schedule) | Lodging | | | |
| X Political | | | | | | |
| Non-Political | \'\' - | of Texas. Complete Schedule T. | <u> </u> | C, officeholder living expense | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | r name Offic | e sought | Office held | | |
| | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| Candidate/Officeholder/Politica | | | aries/Wages/Contra | | THER (enter a category | y not listed at | oove) | |
|----------------------------------|--|--------------------------------|---------------------------|--------------------------|--------------------------|-----------------|--------------|--|
| | | ruction Guide explains how | to complete this | s тоrm. | I | | | |
| 1 Total pages Schedule F4: | | | | | 3 Filer ID (Ethic | s Commiss | sion Filers) | |
| Sch: 6/19 Rpt: | Texas Federation o | f Republican Women F | 1 | | 00054315 | | | |
| 4 CREDIT CARD | Name of final | ncial institution | 5 TOTAL OF | UNITEMIZED | l _e | | | |
| ISSUER | see pi | revious | | TO A CREDIT | ₽ | | | |
| | | | CARD | | | | | |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Cı | redit Card Issuer | Paid | | | |
| Expenditure from | \$1,199.03 | 07/31/2024 | | | | | | |
| corporate funds | • | | | | | | | |
| 7 PAYEE | (a) Payee name | | (b) Payee add | dress; | City, | State, | Zip Code | |
| | | | 16100 Impa | ıct Way | | | | |
| | Courtyard by Marriott | | | - | | | | |
| | | | Pflugerville, | TX 78660 | | | | |
| 8 PURPOSE OF | (a) Category | | (b) Descriptio | n | | | | |
| EXPENDITURE | (See Categories listed at the top | of this schedule) | Q3 Board M | 1eeting | | | | |
| X Political | Event Expense | | | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | · | Check if Austin TX | officeholder living expe | ense | | |
| 9 Complete ONLY if direct | Candidate/Officeholder | | e sought | onesk ii 7 kasılıı, 174, | Office held | | | |
| expenditure to benefit C/OH | | | | | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Cu | redit Card Issuer | Paid | | | |
| Expenditure from | | | (6) Build(6) 6. | out out 100do | T did | | | |
| corporate funds | \$53.73 | 09/02/2024 | | | | | | |
| PAYEE | (a) Dayoo nama | | (b) Dayon add | droce: | City | Ctoto | Zin Codo | |
| TAILE | (a) Payee name | | (b) Payee add | | City, | State, | Zip Code | |
| | Google G Suite | | 1600 Amphitheatre Parkway | | | | | |
| | - | | Mountain vi | ew, CA 94043 | | | | |
| PURPOSE OF | (a) Category | | (b) Descriptio | | | | | |
| EXPENDITURE | (See Categories listed at the top | of this schedule) | software | | | | | |
| X Political | Office Overhead/Rent | al Expense | Johnnard | | | | | |
| I <u>=</u> | | | | i | | | | |
| Non-Political | · · · · · · · · · · · · · · · · · · · | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living expe | ense | | |
| Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | | Office held | | | |
| expenditure to benefit C/OH | () 1 | (1) 5 : (0) | 1() 5 : () 6 | li: 0 11 | 5 | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Ci | redit Card Issuer | Paid | | | |
| Expenditure from corporate funds | \$155.00 | 09/02/2024 | | | | | | |
| · | | | | | | | | |
| PAYEE | (a) Payee name | | (b) Payee add | dress; | City, | State, | Zip Code | |
| | TMobile | | 12920 SE 3 | 8th St. | | | | |
| | riviobile | | | | | | | |
| | | | Bellevue, W | | | | | |
| PURPOSE OF | (a) Category (See Categories listed at the top | of this schodule) | (b) Descriptio | n | | | | |
| EXPENDITURE | Office Overhead/Rent | , | phone | | | | | |
| X Political | | 1 | | | | | | |
| Non-Political | (C) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living expe | ense | | |
| Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | | Office held | | | |
| expenditure to benefit C/OH | | | | | | | | |
| | | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries (Contract Labor,

| | Candidate/Officeriolder/Folitica | ŭ | ruction Guide explains how | to complete t | | TILK (elilel a calego | ry not iisted a | bove) |
|---|---|---|--------------------------------|---|--|-------------------------|-----------------|---------------|
| ┰ | Total pages Schedule F4: | | | | | 3 Filer ID (Ethi | cs Commis | sion Filers) |
| ľ | Sch: 7/19 Rpt: | | ıf Republican Women F | ΡΔΟ | | 00054315 | 05 001111110 | 310111 11013) |
| 4 | CREDIT CARD ISSUER | Name of final | ncial institution revious | 5 TOTAL EXPENI | OF UNITEMIZED DITURES ED TO A CREDIT | \$ | | |
| 6 | PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issuer | · Paid | | |
| | Expenditure from corporate funds | \$110.04 | 07/10/2024 | | | | | |
| 7 | PAYEE | (a) Payee name Spectrum | | | address; George Blvd. ge, UT 84770 | City, | State, | Zip Code |
| 8 | PURPOSE OF | (a) Category | | (b) Descrip | | | | |
| | EXPENDITURE X Political | (See Categories listed at the top Office Overhead/Reni | | internet | | | | |
| | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living exp | ense | |
| 9 | Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | | Office held | | |
| е | expenditure to benefit C/OH | | | | | | | |
| | PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issuer | Paid | | |
| | Expenditure from corporate funds | \$53.73 | 08/02/2024 | | | | | |
| Г | PAYEE | (a) Payee name | • | (b) Payee a | address; | City, | State, | Zip Code |
| | | | | | phitheatre Parkw | ay | | |
| L | | | | | view, CA 94043 | | | |
| l | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schedule) | (b) Description | | | | |
| | X Political | Office Overhead/Ren | | software | | | | |
| | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living exp | ense | |
| е | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | | Office held | | |
| | PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issuer | ⁻ Paid | | |
| | Expenditure from corporate funds | \$5.95 | 08/07/2024 | | | | | |
| Г | PAYEE | (a) Payee name | | (b) Payee a | address; | City, | State, | Zip Code |
| | | BC Trophies | | 715 Discovery Blvd. Ste 403, Bldng 4 Cedar Park, TX 78613 | | | | |
| | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Office Overhead/Rent | | (b) Descrip postage | • | | | |
| | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living exp | ense | |
| е | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | | Office held | | |
| | | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Mange/Control Labor

| Candidate/Officenoider/Politica | - | ruction Guide explains how | | THER (enter a category | not listed at | bove) | | |
|--|---|--------------------------------|---|--------------------------|---------------|--------------|--|--|
| 1 Total pages Schedule F4: | | | | 3 Filer ID (Ethic | s Commiss | sion Filers) | | |
| Sch: 8/19 Rpt: | | of Republican Women F | PAC | 00054315 | | , | | |
| 4 CREDIT CARD ISSUER | Name of fina | ncial institution revious | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ | | | | |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer | r Paid | | | | |
| Expenditure from corporate funds | \$10.00 | 08/10/2024 | | | | | | |
| 7 PAYEE | (a) Payee name Mobilesslybroadcas | st | (b) Payee address; 1 Faneuil Hall Marketplace | City, e | State, | Zip Code | | |
| 0. DUDDOOF OF | (a) Catagon | | Boston, MA 02109 | | | | | |
| 8 PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Advertising Expense | of this schedule) | (b) Description texting | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, TX, | officeholder living expe | ense | | | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Offic | e sought | Office held | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer | r Paid | | | | |
| Expenditure from corporate funds | \$41.01 | 08/10/2024 | | | | | | |
| PAYEE | (a) Payee name | | (b) Payee address; | City, | State, | Zip Code | | |
| | Shippo | | 731 Market St #200 San Francisco, CA 94103 | | | | | |
| PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Office Overhead/Ren | | (b) Description postage | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, TX, | officeholder living expe | ense | | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Offic | e sought | Office held | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer | r Paid | | | | |
| Expenditure from corporate funds | \$621.36 | 08/15/2024 | | | | | | |
| PAYEE | (a) Payee name | | (b) Payee address; | City, | State, | Zip Code | | |
| | Intuit | | 3632 Marine Way | | | | | |
| | | | Mountain view, CA 94043 | | | | | |
| PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | | (b) Description payroll software | | | | | |
| | | | | | | | | |
| Non-Political | \(\frac{1}{2}\) | of Texas. Complete Schedule T. | | Office hold | nse | | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | riame Offic | e sought | Office held | | | | |
| | | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| | The Instruction Guide explains how to complete this form. | | | | | | | | |
|---|---|--------------------------------|---|---------------------------------------|--|--|--|--|--|
| 1 Total pages Schedule F4: | 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) | | | | | |
| Sch: 9/19 Rpt: | Texas Federation of | of Republican Women F | PAC | 00054315 | | | | | |
| 4 CREDIT CARD ISSUER | | ncial institution revious | 5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CREI CARD | \$ | | | | | |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Iss | suer Paid | | | | | |
| Expenditure from corporate funds | \$7.57 | 08/17/2024 | | | | | | | |
| 7 PAYEE | (a) Payee name | | (b) Payee address; | City, State, Zip Code | | | | | |
| | HP | | 10300 Energy Drive | | | | | | |
| | | | Spring, TX 77389 | | | | | | |
| 8 PURPOSE OF | (a) Category | | (b) Description | | | | | | |
| EXPENDITURE X Political | (See Categories listed at the top Office Overhead/Ren | | printer ink | | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, | TX, officeholder living expense | | | | | |
| 9 Complete ONLY if direct | Candidate/Officeholder | r name Offic | e sought | Office held | | | | | |
| expenditure to benefit C/OH | | | | | | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Iss | suer Paid | | | | | |
| Expenditure from corporate funds | \$25.98 | 09/16/2024 | | | | | | | |
| PAYEE (a) Payee name (b) Payee address; | | | (b) Payee address; | City, State, Zip Code | | | | | |
| | Intuit | | 3632 Marine Way | | | | | | |
| | | | Mountain View, CA 940 | 043 | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schedule) | (b) Description payroll processing fee | | | | | | |
| X Political | Fees | · | payron processing ree | | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, | TX, officeholder living expense | | | | | |
| Complete ONLY if direct | Candidate/Officeholder | r name Offic | e sought | Office held | | | | | |
| expenditure to benefit C/OH | | | | | | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Iss | suer Paid | | | | | |
| Expenditure from corporate funds | \$145.00 | 07/01/2024 | | | | | | | |
| PAYEE | (a) Payee name | l | (b) Payee address; | City, State, Zip Code | | | | | |
| | T14.1.71. | | 12920 SE 38th St. | | | | | | |
| | TMobile | | | | | | | | |
| | | | Bellevue, WA 98006 | | | | | | |
| PURPOSE OF | (a) Category (See Categories listed at the top | of this cohodule) | (b) Description | | | | | | |
| EXPENDITURE | Office Overhead/Ren | | phone | | | | | | |
| X Political | | · | | | | | | | |
| Non-Political | \(\frac{1}{2}\) \(\frac{1}{2}\) | of Texas. Complete Schedule T. | | TX, officeholder living expense | | | | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | r name Offic | e sought | Office held | | | | | |
| | | | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| | The Instruction Guide explains how to complete this form. | | | | | | | | |
|---|--|--------------------------------|---|-----------------------------|----------------|--|--|--|--|
| 1 Total pages Schedule F4: | 2 FILER NAME | | | 3 Filer ID (Ethics Comm | ission Filers) | | | | |
| Sch: 10/19 Rpt: | Texas Federation o | f Republican Women F | PAC | 00054315 | | | | | |
| 4 CREDIT CARD ISSUER | | ncial institution revious | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ | | | | | |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer | r Paid | | | | | |
| Expenditure from corporate funds | \$53.73 | 07/01/2024 | | | | | | | |
| 7 PAYEE | (a) Payee name | | (b) Payee address; | City, State | , Zip Code | | | | |
| | Google G Suite | | 1600 Amphitheatre Parkw | | | | | | |
| | (a) Oatawari | | Mountain view, CA 94043 | | | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schedule) | (b) Description software | | | | | | |
| X Political | Office Overhead/Ren | | Sulware | | | | | | |
| Non-Political | • • | of Texas. Complete Schedule T. | | officeholder living expense | | | | | |
| 9 Complete ONLY if direct | Candidate/Officeholder | name Offic | Office sought Office held | | | | | | |
| expenditure to benefit C/OH | | T | 1 | | | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer | r Paid | | | | | |
| Expenditure from corporate funds | \$36.85 | 07/03/2024 | | | | | | | |
| PAYEE | PAYEE (a) Payee name Office Depot | | (b) Payee address; | City, State | , Zip Code | | | | |
| | | | 6600 North Military Trail | | | | | | |
| | | | Boca Raton, FL 33496 | | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schodulo) | (b) Description | | | | | | |
| l <u> </u> | Office Overhead/Ren | | office supplies | | | | | | |
| X Political | | | | | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | officeholder living expense | | | | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | Office held | | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer | r Paid | | | | | |
| | | | | | | | | | |
| PAYEE | (a) Payee name | | (b) Payee address; | City, State | , Zip Code | | | | |
| | | | | | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | | | | | | |
| Political | | | | | | | | | |
| Non-Political | (C) Check if travel outside | of Texas. Complete Schedule T. | | | | | | | |
| Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | Office held | | | | | |
| expenditure to benefit C/OH | | | | | | | | | |
| | | | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Mange/Control Labor

| Candidate/Officenoider/Politica | • | ruction Guide explains how | | THER (enter a category not listed above) | |
|---|---|----------------------------------|---|--|-----|
| 1 Total pages Schedule F4: | | <u>·</u> | | 3 Filer ID (Ethics Commission Filers | rs) |
| Sch: 11/19 Rpt: | | of Republican Women P | PAC | 00054315 | , |
| 4 CREDIT CARD ISSUER | Name of finar | ncial institution erce Bank | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ | |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer | Paid | |
| Expenditure from corporate funds | \$85.34 | 09/12/2024 | | | |
| 7 PAYEE | (a) Payee name Cover 2 | | (b) Payee address; 13701 N Highway 183 | City, State, Zip Co | ode |
| | (.) O-t-mam: | | Austin, TX 78750 | | |
| 8 PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Food/Beverage Exper | , | (b) Description Lunch at restaurant | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, TX, | officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Candidate/Officeholder name Office sought | | | e sought | Office held | |
| PAYMENT Expenditure from corporate funds | (a) Amount Charged \$325.44 | (b) Date of Charge 07/29/2024 | (c) Date(s) Credit Card Issuer | Paid | _ |
| PAYEE | (a) Payee name | | (b) Payee address; | City, State, Zip Co | ode |
| | Courtyard by Marric | ott | 16100 Impact Way | | |
| DUDDOCE OF | (a) Catagony | | Pflugerville, TX 78660 (b) Description | | |
| PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Event Expense | of this schedule) | Lodging | | |
| Non-Political | (C) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, TX, | officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | Office held | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer | Paid | |
| Expenditure from corporate funds | \$6.09 | 08/20/2024 | | | |
| PAYEE | (a) Payee name | | (b) Payee address; | City, State, Zip Co | ode |
| | Shippo | | 731 Market St #200 San Francisco, CA 94103 | | |
| PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Office Overhead/Rent | , | (b) Description postage | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, TX, | officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | Office held | |
| İ | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| | | The Inst | ruction Guide explains how | to complete | this form. | (* ** ** ****************************** | , | , |
|----------|---|---|--------------------------------|-------------------------|--|---|-----------|--------------|
| 1 | Total pages Schedule F4: | 2 FILER NAME | | | | 3 Filer ID (Ethic | cs Commis | sion Filers) |
| | Sch: 12/19 Rpt: | Texas Federation o | f Republican Women F | PAC | | 00054315 | | |
| 4 | CREDIT CARD ISSUER | | ncial institution revious | EXPEN | OF UNITEMIZED IDITURES GED TO A CREDIT | \$ | | |
| 6 | PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) |) Credit Card Issue | Paid | | |
| | Expenditure from corporate funds | \$24.89 | 08/21/2024 | | | | | |
| 7 | PAYEE | (a) Payee name Adobe Systems | | (b) Payee 345 Park | Avenue | City, | State, | Zip Code |
| Ļ | DUDDOSE OF | (a) Catagony | | | e, CA 95110 | | | |
| 8 | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Office Overhead/Rent | | (b) Descrip software | otion | | | |
| | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living exp | ense | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | | Office held | | |
| Г | PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) |) Credit Card Issue | Paid | | |
| | Expenditure from corporate funds | \$2,000.00 | 08/05/2024 | | | | | |
| | PAYEE | (a) Payee name | | (b) Payee | address; | City, | State, | Zip Code |
| | | Texas Young Republicans | | 2604 Brig | ght Rock Lane | | | |
| | | | | | TX 77304 | | | |
| | PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Event Expense | of this schedule) | (b) Descrip | | | | |
| | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin TX | officeholder living exp | iense | |
| e | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | · | e sought | Oneok ii 7 dodaii, 17X, | Office held | - CHISC | |
| H | PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) |) Credit Card Issuer | ⁻ Paid | | |
| | Expenditure from corporate funds | \$642.98 | 08/05/2024 | | | | | |
| Г | PAYEE | (a) Payee name | I | (b) Payee | address; | City, | State, | Zip Code |
| | | Sheraton Georgeto | wn | 1101 Wo | odlawn Ave. | | | |
| L | | | | Georgeto | own, TX 78628 | | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top Event Expense | of this schedule) | (b) Descrip Lodging | otion | | | |
| | x Political | • | | | | | | |
| L | Non-Political | ` 1 | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living exp | ense | |
| e | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | | Office held | | |
| Г | | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Mange/Control Labor

| Candidate/Officenoider/Politica | - | ruction Guide explains how | to complete the | | THER (enter a catego | ry not listed al | oove) |
|---|---|---------------------------------------|-------------------------|--|-------------------------|------------------|--------------|
| 1 Total pages Schedule F4: | | · · · · · · · · · · · · · · · · · · · | • | | 3 Filer ID (Ethi | ics Commiss | sion Filers) |
| Sch: 13/19 Rpt: | | f Republican Women F | PAC | | 00054315 | | , |
| 4 CREDIT CARD ISSUER | Name of finar | ncial institution revious | 5 TOTAL (| OF UNITEMIZED DITURES ED TO A CREDIT | \$ | | |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | r Paid | | |
| Expenditure from corporate funds | \$75.00 | 08/24/2024 | | | | | |
| 7 PAYEE | (a) Payee name National Federation | ı of | (b) Payee a | Alfred St | City, | State, | Zip Code |
| | () 0 : | | + | a, VA 22314 | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schedule) | (b) Descript | tion | | | |
| | Fees | · · · · · · · · · · · · · · · · · · · | Dues | | | | |
| X Political | | | | | | | |
| Non-Political | (*) – | of Texas. Complete Schedule T. | [| Check if Austin, TX, | officeholder living exp | oense | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | | Office held | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | r Paid | | |
| Expenditure from corporate funds | \$318.66 | 08/25/2024 | (0) 2 ato (0) | | | | |
| PAYEE | (a) Payee name | | (b) Payee a | address; | City, | State, | Zip Code |
| | [`` | | 1001 Grai | nd Central Pkwy | , | | |
| | | | Conroe, T | X 77304 | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top Travel In District | of this schedule) | (b) Descript lodging | tion | | | |
| X Political | Traver in Biodiec | | | | | | |
| Non-Political | (C) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living exp | pense | |
| Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | | Office held | | |
| expenditure to benefit C/OH | (-) A | (h) D-tt Ob | (-) D-+-(-) | Out dit Out discount | - D-1-I | | |
| PAYMENT Expenditure from corporate funds | (a) Amount Charged \$144.96 | (b) Date of Charge 08/28/2024 | (c) Date(s) | Credit Card Issue | rPalu | | |
| PAYEE | (a) Payee name | | (b) Payee a | address; | City, | State, | Zip Code |
| | Amazon Marketplad | ce | 410 Terry | Ave N | | | |
| | | | Seattle, W | /A 98109-5210 | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schedule) | (b) Descript | | | | |
| X Political | Office Overhead/Rent | al Expense | Since Sup | p50 | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | <u>I</u> | Check if Austin TY | officeholder living exp | nense | |
| Complete ONLY if direct | Candidate/Officeholder | · | <u>L</u> e sought | Cricck ii Austili, 1A, | Office held | 001130 | |
| expenditure to benefit C/OH | | | ·y··· | | 200010 | | |
| | I | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

| Candidate/Officenoider/Politica | - | ruction Guide explains how | | HER (enter a category | not listed at | pove) |
|---|---|----------------------------------|---|--------------------------|---------------|--------------|
| 1 Total pages Schedule F4: | | | | 3 Filer ID (Ethic | s Commiss | sion Filers) |
| Sch: 14/19 Rpt: | | of Republican Women F | PAC | 00054315 | | , |
| 4 CREDIT CARD ISSUER | Name of final | ncial institution revious | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ | | |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer | Paid | | |
| Expenditure from corporate funds | \$89.05 | 08/27/2024 | | | | |
| 7 PAYEE | (a) Payee name Office Depot | | (b) Payee address; 6600 North Military Trail | City, | State, | Zip Code |
| | | | Boca Raton, FL 33496 | | | |
| 8 PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Office Overhead/Reni | | (b) Description office supplies | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, TX, | officeholder living expe | nse | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | Office held | | |
| PAYMENT Expenditure from corporate funds | (a) Amount Charged \$960.00 | (b) Date of Charge 09/03/2024 | (c) Date(s) Credit Card Issuer | ⁻ Paid | | |
| PAYEE | (a) Payee name National Federation | n of | (b) Payee address; 124 North Alfred St Alexandria, VA 22314 | City, | State, | Zip Code |
| PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Fees | of this schedule) | (b) Description Dues | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, TX, | officeholder living expe | nse | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Offic | e sought | Office held | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer | Paid | | |
| Expenditure from corporate funds | \$2,000.00 | 09/03/2024 | | | | |
| PAYEE | (a) Payee name | | (b) Payee address; | City, | State, | Zip Code |
| | National Federatior | n of | 124 North Alfred St | | | |
| | | | Alexandria, VA 22314 | | | |
| PURPOSE OF EXPENDITURE X Political | (a) Category (See Categories listed at the top Fees | of this schedule) | (b) Description Dues | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, TX, | officeholder living expe | nse | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | Office held | | |
| | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| Candidate/Officeholder/Politica | | ices Sal ruction Guide explains how | - | THER (enter a category r | not listed ab | oove) | |
|---------------------------------|--|--|------------------------------------|---------------------------|---------------|-------------|--|
| 4. Tatal manage Calculute E4. | | ruction Guide explains now | to complete this form. | a Filer ID (Ethica | 0 | : =:!> | |
| 1 Total pages Schedule F4: | | (B | | 3 Filer ID (Ethics | Commiss | ion Filers) | |
| Sch: 15/19 Rpt: | | f Republican Women P | | 00054315 | | | |
| 4 CREDIT CARD | Name of finar | ncial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES | œ | | | |
| ISSUER | see pi | revious | CHARGED TO A CREDIT | . " | | | |
| | | | CARD | | | | |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issue | r Paid | | | |
| Expenditure from | \$19.73 | 09/04/2024 | | | | | |
| corporate funds | 4200 | 3070 17202 1 | | | | | |
| 7 PAYEE | (a) Payee name | | (b) Payee address; | City, | State, | Zip Code | |
| | (1) | | 731 Market St | - 97 | , | | |
| | Shippo | | #200 | | | | |
| | | | San Francisco, CA 94103 | • | | | |
| 8 PURPOSE OF | (a) Category | | (b) Description | , | | | |
| EXPENDITURE | (See Categories listed at the top | of this schedule) | postage | | | | |
| Ly Dolitical | Office Overhead/Rent | tal Expense | postage | | | | |
| X Political | | | | | | | |
| Non-Political | \(\frac{1}{2}\) | of Texas. Complete Schedule T. | <u> </u> | officeholder living expen | se | | |
| 9 Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | Office held | | | |
| expenditure to benefit C/OH | | | | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issue | r Paid | | | |
| Expenditure from | \$1,350.00 | 09/05/2024 | | | | | |
| corporate funds | , | | | | | | |
| PAYEE | (a) Payee name | | (b) Payee address; | City, | State, | Zip Code | |
| | | | 22 Eleven Oaks Circle | | | | |
| | Republican Market. | com | | | | | |
| | | | Eustis, FL 32726 | | | | |
| PURPOSE OF | (a) Category | | (b) Description | | | | |
| EXPENDITURE | (See Categories listed at the top | | Tribute to Women Pins | | | | |
| X Political | Gift/Awards/Memorial | s Expense | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, TX, | officeholder living expen | se | | |
| Complete ONLY if direct | Candidate/Officeholder | · · · · · · · · · · · · · · · · · · · | e sought | Office held | | | |
| expenditure to benefit C/OH | | | · · | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issue | r Paid | | | |
| Expenditure from | | | | | | | |
| corporate funds | \$40.00 | 09/05/2024 | | | | | |
| PAYEE | (a) Payee name | | (b) Payee address; | City, | State, | Zip Code | |
| I TAILL | (a) Payee name | | | | State, | Zip Code | |
| | Mobilesslybroadcas | st | 1 Faneuil Hall Marketplac | е | | | |
| | | | D+ MA 00100 | | | | |
| | (a) Catagoni | | Boston, MA 02109 | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schedule) | (b) Description | | | | |
| l <u>—</u> | Advertising Expense | • | texting | | | | |
| X Political | | | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | Check if Austin, TX, | officeholder living expen | se | | |
| Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | Office held | | | |
| expenditure to benefit C/OH | | | | | | | |
| | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| | The Instruction Guide explains how to complete this form. | | | | | | | | |
|---|---|---------------------------------------|-------------------------------------|----------------------|-------------------------|----------|--------------|--|--|
| 1 Total pages Schedule F4: | 2 FILER NAME | | | | 3 Filer ID (Ethic | s Commis | sion Filers) | | |
| Sch: 16/19 Rpt: | Texas Federation o | of Republican Women F | PAC | | 00054315 | | | | |
| 4 CREDIT CARD ISSUER | | ncial institution revious | 5 TOTAL OF UEXPENDITUE CHARGED CARD | | \$ | | | | |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Cre | dit Card Issuer | Paid | | | | |
| Expenditure from corporate funds | \$42.06 | 09/07/2024 | | | | | | | |
| 7 PAYEE | (a) Payee name | | (b) Payee addr | ess; | City, | State, | Zip Code | | |
| | Amazon Marketplad | ce | 410 Terry Av | e N | | | | | |
| | | | Seattle, WA 9 | 98109-5210 | | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schedule) | (b) Description | | | | | | |
| X Political | Office Overhead/Ren | · · · · · · · · · · · · · · · · · · · | office supplie | S | | | | | |
| Non-Political | (C) Check if travel outside | of Texas. Complete Schedule T. | | heck if Austin, TX, | officeholder living exp | ense | | | |
| 9 Complete ONLY if direct | Candidate/Officeholder | name Offic | e sought | | Office held | | | | |
| expenditure to benefit C/OH | | | | | | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Cre | dit Card Issuer | Paid | | | | |
| Expenditure from corporate funds | \$400.89 | 09/06/2024 | | | | | | | |
| PAYEE (a) Payee name (l | | (b) Payee addr | ess; | City, | State, | Zip Code | | | |
| | Office Depot | | 6600 North M | lilitary Trail | | | | | |
| | | | Boca Raton, | FL 33496 | | | | | |
| PURPOSE OF | (a) Category | of this cohodule) | (b) Description | | | | | | |
| EXPENDITURE X Political | (See Categories listed at the top Office Overhead/Reni | | office supplie | S | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | П | heck if Austin, TX, | officeholder living exp | ense | | | |
| Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | | Office held | | | | |
| expenditure to benefit C/OH | | | | | | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Cre | dit Card Issuer | Paid | | | | |
| Expenditure from corporate funds | \$110.57 | 09/09/2024 | | | | | | | |
| PAYEE | (a) Payee name | <u> </u> | (b) Payee addr | ess; | City, | State, | Zip Code | | |
| | | | 275 E St. Ge | orge Blvd. | | | | | |
| | Spectrum | | | | | | | | |
| | | | St. George, UT 84770 | | | | | | |
| PURPOSE OF | (a) Category | (4) | (b) Description | | | | | | |
| EXPENDITURE | (See Categories listed at the top Office Overhead/Ren | | internet | | | | | | |
| X Political | | | | | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | check if Austin, TX, | officeholder living exp | ense | | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder | name Office | e sought | | Office held | | | | |
| | | | | _ | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| | | The Instruction Guide explains how to complete this form. | | | | | | | | |
|---|----------------------------------|---|--------------------------------|-----------------------|--|---------------------------|-----------|--------------|--|--|
| 1 | Total pages Schedule F4: | 2 FILER NAME | | | | 3 Filer ID (Ethi | cs Commis | sion Filers) | | |
| | Sch: 17/19 Rpt: | Texas Federation o | f Republican Women F | PAC | | 00054315 | | | | |
| 4 | CREDIT CARD ISSUER | | ncial institution revious | EXPEN | OF UNITEMIZED DITURES ED TO A CREDIT | \$ | | | | |
| 6 | PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | er Paid | | | | |
| | Expenditure from corporate funds | \$31.05 | 09/09/2024 | | | | | | | |
| 7 | PAYEE | (a) Payee name | | (b) Payee | address; | City, | State, | Zip Code | | |
| | | USPS.com | | | ke Creek Pkwy | | | | | |
| | | | | | X 78729-1711 | | | | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schedule) | (b) Descrip | ition | | | | | |
| | X Political | Office Overhead/Rent | | stamps | | | | | | |
| | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX | , officeholder living exp | ense | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | | Office held | | | | |
| е | xpenditure to benefit C/OH | | | | | | | | | |
| | PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | er Paid | | | | |
| | Expenditure from corporate funds | \$488.75 | 09/11/2024 | | | | | | | |
| | PAYEE (a) Payee name | | | (b) Payee | address; | City, | State, | Zip Code | | |
| | | Diama Dia Carana | | 1615 Dor | chester | | | | | |
| | | Plano Pin Company | У | Ste. 103 | | | | | | |
| | | | | Plano, TX | 75075 | | | | | |
| | PURPOSE OF | (a) Category | of this colored (Is) | (b) Descrip | | | | | | |
| | EXPENDITURE | (See Categories listed at the top Gift/Awards/Memorial | | Tribute to Women Pins | | | | | | |
| | X Political | | | | | | | | | |
| | Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX | , officeholder living exp | ense | | | |
| | Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | | Office held | | | | |
| е | xpenditure to benefit C/OH | | | | | | | | | |
| | PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | er Paid | | | | |
| | Expenditure from corporate funds | \$2,015.50 | 07/03/2024 | | | | | | | |
| | PAYEE | (a) Payee name | • | (b) Payee | address; | City, | State, | Zip Code | | |
| | | | | 22 South | Carroll St | | | | | |
| | | Best Western Prem | nier Park Hotel | | | | | | | |
| | | | | Madison, | WI 53703 | | | | | |
| | PURPOSE OF | (a) Category | | (b) Descrip | | | | | | |
| | EXPENDITURE | (See Categories listed at the top Travel Out of District | of this schedule) | RNC Con | vention | | | | | |
| | X Political | The state of Blothlot | | | | | | | | |
| | Non-Political | (C) X Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX | , officeholder living exp | ense | | | |
| | Complete ONLY if direct | Candidate/Officeholder | name Office | e sought | | Office held | | | | |
| е | xpenditure to benefit C/OH | | | | | | | | | |
| | | | | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| Candidate/Officeholder/Politica | | | alaries/Wages/Co | | OTHER (enter a categor | ory not listed at | oove) |
|---------------------------------|-----------------------------------|--------------------------------|------------------|----------------------------|---------------------------|-------------------|--------------|
| | The Inst | ruction Guide explains hov | v to complete | this form. | | | |
| 1 Total pages Schedule F4: | 2 FILER NAME | | | | 3 Filer ID (Eth | ics Commiss | sion Filers) |
| Sch: 18/19 Rpt: | Texas Federation o | f Republican Women | PAC | | 00054315 | | |
| 4 CREDIT CARD | Name of final | ncial institution | | OF UNITEMIZED | I . | | |
| ISSUER | see pi | revious | | IDITURES SED TO A CREDI | _ \$ | | |
| | | | CARD | DED TO A CITEDI | ' | | |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | er Paid | | |
| Expenditure from | \$21.39 | 09/16/2024 | | | | | |
| corporate funds | 7=1.00 | 00/10/101 | | | | | |
| 7 PAYEE | (a) Payee name | | (b) Payee | address; | City, | State, | Zip Code |
| | | | 731 Mark | ket St | | | |
| | Shippo | | #200 | | | | |
| | | | San Fran | ncisco, CA 9410 | 3 | | |
| 8 PURPOSE OF | (a) Category | | (b) Descrip | | | | |
| EXPENDITURE | (See Categories listed at the top | | postage | | | | |
| X Political | Office Overhead/Rent | tai Expense | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, T) | X, officeholder living ex | nense | |
| 9 Complete ONLY if direct | Candidate/Officeholder | · | ce sought | | Office held | | |
| expenditure to benefit C/OH | | | · · | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | er Paid | | |
| Expenditure from | \$5.95 | 09/18/2024 | | | | | |
| corporate funds | ψ3.93 | 09/10/2024 | | | | | |
| PAYEE | (a) Payee name | | (b) Payee | address: | City, | State, | Zip Code |
| | | | 1 ` ′ ′ | overy Blvd. | - 3, | , | |
| | BC Trophies | | Ste. 403, | - | | | |
| | | | | Park, TX 78613 | | | |
| PURPOSE OF | (a) Category | | (b) Descrip | | | | |
| EXPENDITURE | (See Categories listed at the top | • | postage | | | | |
| X Political | Office Overhead/Rent | tai Expense | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | I | Check if Austin, T) | X, officeholder living ex | onense. | |
| Complete ONLY if direct | Candidate/Officeholder | <u> </u> | ce sought | | Office held | | |
| expenditure to benefit C/OH | | | J | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | er Paid | | |
| Expenditure from | \$24.89 | 09/23/2024 | | | | | |
| corporate funds | Ψ24.09 | 09/23/2024 | | | | | |
| PAYEE | (a) Payee name | | (b) Payee | address: | City, | State, | Zip Code |
| | (ay i ay ou manne | | 345 Park | | 2.35, | , | |
| | Adobe Inc | | 0.01.4.11 | 7,1701140 | | | |
| | | | San Jose | e, CA 95110 | | | |
| PURPOSE OF | (a) Category | | (b) Descrip | | | | |
| EXPENDITURE | (See Categories listed at the top | , | software | | | | |
| X Political | Office Overhead/Rent | tai Expense | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin T | X, officeholder living ex | onense. | |
| Complete ONLY if direct | Candidate/Officeholder | <u> </u> | ce sought | Gricok ii Austiri, 17 | Office held | | |
| expenditure to benefit C/OH | | | 9 | | | | |
| · . | <u> </u> | | | | | | |
| ı | | | | | | | |

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

| Candidate/Officeholder/Politica | | ruction Guide explains how | alaries/Wages/Con | | THER (enter a categor | y not listed al | oove) | |
|---------------------------------|--|--------------------------------|---------------------------------------|-----------------------|-------------------------|-----------------|----------|--|
| 1 Total pages Schedule F4: | | | 3 Filer ID (Ethics Commission Filers) | | | | | |
| | | DAC | | | | | | |
| Sch: 19/19 Rpt: | Texas Federation o | 1 | | 00054315 | | | | |
| 4 CREDIT CARD ISSUER | Name of final | ncial institution | | OF UNITEMIZED DITURES | \$ | | | |
| ISSUER | see p | revious | | ED TO A CREDIT | | | | |
| | | | CARD | | | | | |
| 6 PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | r Paid | | | |
| Expenditure from | \$142.80 | 09/24/2024 | | | | | | |
| corporate funds | Ψ1-12.00 | 00/24/2024 | | | | | | |
| 7 PAYEE | (a) Payee name | | (b) Payee a | address. | City, | State, | Zip Code | |
| | (a) rayee name | | | ance Blvd Ste 2 | • | | • | |
| | Omnis Network | | | ance bivu sie z | .so, romance, c | JA 90303 |) | |
| | | | Ste. 230 | 04.00500 | | | | |
| | () 0 : | | | CA 90503 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | of this schedule) | (b) Descrip | | | | | |
| l <u>—</u> | Office Overhead/Ren | | website h | osting | | | | |
| X Political | | • | | | | | | |
| Non-Political | (c) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living exp | ense | | |
| 9 Complete ONLY if direct | Candidate/Officeholder | name Offic | e sought | | Office held | | | |
| expenditure to benefit C/OH | | | | | | | | |
| PAYMENT | (a) Amount Charged | (b) Date of Charge | (c) Date(s) | Credit Card Issue | r Paid | | | |
| Expenditure from | \$270.63 | 09/26/2024 | | | | | | |
| corporate funds | φ270.03 | 09/20/2024 | | | | | | |
| PAYEE | (a) Payee name | | (b) Payee a | addrace: | City, | State, | Zip Code | |
| ' | (a) r ayee name | | | City, | State, | Zip Code | | |
| | Plano Pin Company | V | 1615 Dorchester | | | | | |
| | | • | Ste. 103 Plano, TX 75075 | | | | | |
| DUDDOOF 05 | (a) Cataman | | | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top | (b) Descrip | uon | | | | | |
| l <u>—</u> | Gift/Awards/Memorial | | Pins | | | | | |
| X Political | | · | | | | | | |
| Non-Political | (C) Check if travel outside | of Texas. Complete Schedule T. | | Check if Austin, TX, | officeholder living exp | ense | | |
| Complete ONLY if direct | Candidate/Officeholder | name Offic | e sought | | Office held | | | |
| expenditure to benefit C/OH | | | | | | | | |
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| | The Instru | ction Guide explains how to complete this form. | 1 | | pages Schedule K: 1/5 Rpt: 183/188 | |
|---|-----------------|---|---------|---------|---------------------------------------|---------|
| 2 | FILER NAME | | 3 | | · | lers) |
| _ | | ation of Republican Women PAC | | | 54315 | .0.0) |
| 4 | Date | 5 Name of person from whom amount is received | | | 8 Amount (\$) | |
| | 07/27/2024 | Berkheimer-Lubeck, Donnie | | | | 83.33 |
| | 0112112024 | | | | | 00.00 |
| | | 6 Address of person from whom amount is received; City; State; Zip Code | | | | |
| | | | | | | |
| | | Tomball, TX 77375 | | | | |
| | | | f nolit | ical co | | |
| | | Refund Tribute to Women ticket | . ро | | | |
| _ | Data | Name of paragraph from whom amount is required | | | Amount (t) | |
| | Date 08/12/2024 | Name of person from whom amount is received Capital One Bank | | | Amount (\$) | 193.61 |
| | 00/12/2024 | · · · · · · · · · · · · · · · · · · · | | | | +93.01 |
| | | Address of person from whom amount is received; City; State; Zip Code | | | | |
| | | | | | | |
| | | city of industry, CA 91716-0599 | | | | |
| | | | f nolit | ical co | | |
| | | Rewards | i polit | icai co | numbulion returned to mer | |
| | D-4- | | | | A (d) | |
| | Date 09/12/2024 | Name of person from whom amount is received | | | Amount (\$) | 12.57 |
| | 09/12/2024 | Capital One Bank | | | | 12.51 |
| | | Address of person from whom amount is received; City; State; Zip Code | | | | |
| | | | | | | |
| | | city of industry, CA 91716-0599 | | | | |
| | | | f nolit | ical co | | |
| | | Rewards credit | . ро | | | |
| _ | Date | Name of person from whom amount is received | | | Amount (\$) | |
| | 07/22/2024 | Commerce Bank | | | ` ' | \$40.05 |
| | 0112212024 | | | | | p40.03 |
| | | Address of person from whom amount is received; City; State; Zip Code | | | | |
| | | | | | | |
| | | Kansas City, MO 64180-8009 | | | | |
| | | <u> </u> | f polit | ical co | ntribution returned to filer | |
| | | refund finance charge | | | | |
| _ | Date | Name of person from whom amount is received | | | Amount (\$) | |
| | 07/24/2024 | Cowtown RW | | | | 200.00 |
| | 0112412024 | Address of person from whom amount is received; City; State; Zip Code | | | | 200.00 |
| | | Address of person from whom amount is received, City, State, 2ip Code | | | | |
| | | | | | | |
| | | Fort Worth, TX 76114 | | | | |
| | | | f polit | ical co | | |
| | | check returned for incorrect address | | | | |
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| | The Instru | ctio | on Guide explains how to complete this form. | 1 | | • | ages Schedule K: /5 Rpt: 184/188 | |
|---|--------------------|----------|--|-----------|--------|--------|-------------------------------------|----------|
| 2 | FILER NAME | | | 3 | | | (Ethics Commission | Filers) |
| | Texas Feder | atio | on of Republican Women PAC | | 00 | 0543 | 315 | |
| 4 | Date 07/31/2024 | <u> </u> | Name of person from whom amount is received Frost Bank Address of person from whom amount is received; City; State; Zip Code | | | | 8 Amount (\$) | \$18.58 |
| | | | Austin, TX 78767 | | | | | |
| | | 7 | Purpose for which amount is received | if politi | ical (| contr | ibution returned to filer | |
| | Date | | Name of person from whom amount is received | | | | Amount (\$) | |
| | 07/31/2024 | | Frost Bank | | | | | \$18.58 |
| | | ļ | Address of person from whom amount is received; City; State; Zip Code | | | | | |
| | | | Address of person from whom amount is received, City, State, Zip Code | | | | | |
| | | | | | | | | |
| | | | Austin, TX 78767 | | | | | |
| | | | | if noliti | ical | contri | ibution returned to filer | |
| | | | Interest | n ponti | ioui · | 001161 | ibation rotamed to mor | |
| | Dete | <u> </u> | Name of page of from the page on a continued | | | | Δ α (Φ) | |
| | Date 08/30/2024 | | Name of person from whom amount is received Frost Bank | | | | Amount (\$) | \$75.60 |
| | 00/30/2024 | ļ | | | | | | Ψ13.00 |
| | | | Address of person from whom amount is received; City; State; Zip Code | | | | | |
| | | | | | | | | |
| | | | Austin, TX 78767 | | | | | |
| | | | Purpose for which amount is received Check | if politi | ical | contr | ibution returned to filer | |
| | | | Interest | | | | | |
| | Date | | Name of person from whom amount is received | | | | Amount (\$) | |
| | 07/10/2024 | | Georgetown Area Republican Women | | | | | \$600.00 |
| | | ļ | Address of person from whom amount is received; City; State; Zip Code | | | | | |
| | | | | | | | | |
| | | | Committee TV 70000 | | | | | |
| | | L | Georgetown, TX 78633 | | | | | |
| | | | Purpose for which amount is received | if politi | ical | contr | ibution returned to filer | |
| | | <u> </u> | | | | | | |
| | Date | | Name of person from whom amount is received | | | | Amount (\$) | |
| | 07/15/2024 | <u> </u> | Lubbock Area RW | | | | | \$600.00 |
| | | | Address of person from whom amount is received; City; State; Zip Code | | | | | |
| | | | | | | | | |
| | | | Lubbock, TX 79424 | | | | | |
| | | \vdash | | if politi | ical - | Contri | ibution returned to filer | |
| | | | Check returned - incorrect address | ıı ponu | iodi (| COTILI | isation returned to men | |
| | | <u> </u> | | | | | | |
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| | The Instru | ction Guide explains how to complete this form. | 1 | | | ages Schedule K: /5 Rpt: 185/188 | |
|---|--|---|--------|-----|---------|-------------------------------------|------------|
| 2 | 2 FILER NAME Texas Federation of Republican Women PAC 3 Filer I 0005 | | | | | | on Filers) |
| 4 | Date 07/29/2024 | Name of person from whom amount is received Metroplex RW Address of person from whom amount is received; City; State; Zip Code | | | | 8 Amount (\$) | \$600.00 |
| | | Arlington, TX 76017 | | | | | |
| | | 7 Purpose for which amount is received | oliti | ica | l contr | ibution returned to fil | er |
| | Date 07/08/2024 | Name of person from whom amount is received Plains Capital Bank Address of person from whom amount is received; City; State; Zip Code Lubbock, TX 79408 | | | | Amount (\$) | \$1,076.67 |
| | | | ooliti | ica | l contr | libution returned to fil | er |
| | Date 07/31/2024 | Name of person from whom amount is received Plains Capital Bank Address of person from whom amount is received; City; State; Zip Code Lubbock, TX 79408 | | | | Amount (\$) | \$467.87 |
| | | Purpose for which amount is received | ooliti | ica | l contr | ibution returned to fil | er |
| | Date 08/05/2024 | Name of person from whom amount is received Plains Capital Bank Address of person from whom amount is received; City; State; Zip Code Lubbock, TX 79408 | | | | Amount (\$) | \$1,149.10 |
| | | | ooliti | ica | l contr | ribution returned to fil | er |
| | Date 08/09/2024 | Name of person from whom amount is received Plains Capital Bank Address of person from whom amount is received; City; State; Zip Code | | | | Amount (\$) | \$19.59 |
| | | Lubbock, TX 79408 Purpose for which amount is received Check if p Interest | ooliti | ica | l contr | ibution returned to fil | er |
| | | | | | | | |

| | The Instru | cti | on Guide explains how to complete this form. | 1 | | al pages Schedule K: h: 4/5 Rpt: 186/188 |
|---|--------------------|----------|---|--------|-------|---|
| 2 | FILER NAME | | | 3 | | er ID (Ethics Commission Filers) |
| | Texas Feder | ati | on of Republican Women PAC | | 000 | 054315 |
| 4 | Date 08/31/2024 | 6 | Name of person from whom amount is received Plains Capital Bank Address of person from whom amount is received; City; State; Zip Code | | | 8 Amount (\$) |
| | | | Lubbock, TX 79408 | | | |
| | | 7 | Purpose for which amount is received | politi | cal c | contribution returned to filer |
| | Date | | Name of person from whom amount is received | | | Amount (\$) |
| | 07/15/2024 | | Plains Capital Bank | | | \$1,602.61 |
| | | ļ | Address of person from whom amount is received; City; State; Zip Code | | | ······ |
| | | | Lubbock, TX 79408 | | | |
| | | | Purpose for which amount is received | politi | cal c | contribution returned to filer |
| | | | | | | |
| | Date | | Name of person from whom amount is received | | | Amount (\$) |
| | 07/30/2024 | <u> </u> | Reagan Legacy RW | | | \$200.00 |
| | | | Address of person from whom amount is received; City; State; Zip Code | | | |
| | | | | | | |
| | | | Marafald TV 70000 | | | |
| | | L | Mansfield, TX 76063 | | | |
| | | | | politi | cal c | contribution returned to filer |
| | | L | check returned by bank for wrong address | | | |
| | Date | | Name of person from whom amount is received | | | Amount (\$) |
| | 09/06/2024 | <u> </u> | Reagan Legacy RW | | | \$200.00 |
| | | | Address of person from whom amount is received; City; State; Zip Code | | | |
| | | | | | | |
| | | | Mansfield, TX 76063 | | | |
| | | Н | Purpose for which amount is received | politi | cal c | contribution returned to filer |
| | | | Check returned - incorrect accress | | | |
| | Date | Ħ | Name of person from whom amount is received | | | Amount (\$) |
| | 07/10/2024 | | Republican Women's Club of Katy | | | \$600.00 |
| | | ļ | Address of person from whom amount is received; City; State; Zip Code | | | |
| | | | | | | |
| | | | Katy, TX 77494 | | | |
| | | \vdash | <u> </u> | noli+: | cal c | contribution returned to filer |
| | | | Check returned - incorrect address | μυπι | cai C | contribution returned to filer |
| | | <u> </u> | Check returned incorrect address | | | |
| | | | | | | |

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 5/5 Rpt: 187/188 2 FILER NAME Filer ID (Ethics Commission Filers) Texas Federation of Republican Women PAC 00054315 5 Name of person from whom amount is received 8 Amount (\$) Date 08/01/2024 \$400.00 Washington County RW 6 Address of person from whom amount is received; City; State; Zip Code Brenham, TX 77834 Purpose for which amount is received Check if political contribution returned to filer check returned for wrong address

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

| SCHEDULE | |
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| | |

| The Insti | ruction Guide explains how to complete this form. | 1 Total pages Schedule T: Sch: 1/1 Rpt: 188/188 | | | | |
|------------------------------|--|--|--|--|--|--|
| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) | | | | |
| | n of Republican Women PAC | 00054315 | | | | |
| 4 Name of Contribut | or / Corporation or Labor Organization / Pledgor /Payee | 1 | | | | |
| | emier Park Hotel | | | | | |
| 5 Contribution / Expe | enditure reported on: | | | | | |
| Schedule A2 | Schedule B Schedule B(J) Schedule C2 | Schedule D Schedule F1 | | | | |
| Schedule F2 | X Schedule F4 Schedule G Schedule H | Schedule COH-UC | | | | |
| 6 Dates of Travel | 7 Name of person(s) traveling | | | | | |
| | Warren, Zenia | | | | | |
| | 8 Departure city or name of departure location | | | | | |
| 07/14/2024 | | | | | | |
| | Destination city or name of destination location | | | | | |
| 07/14/2024 | Madison | | | | | |
| 10 Means of transport | tation 11 Purpose of travel (including name of conference, seminar, or | r other event) | | | | |
| | RNC Convention | | | | | |
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