

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

| | | | |
|---|--|--|-----------------------------------|
| The GPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00080668 | 2 Total pages filed: 16 |
| 3 COMMITTEE NAME Capitol Republican Women PAC | | OFFICE USE ONLY | |
| | | Date Received ELECTRONICALLY FILED 07/14/2024 | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 9712 Copper Creek Drive Austin, TX 78729 | |
| | | Date Hand-delivered or Date Postmarked | |
| | | Receipt # | Amount |
| | | Date Processed | |
| | | Date Imaged | |
| 5 CAMPAIGN TREASURER NAME | | MS / MRS / MR FIRST MI Ms. Maricela NICKNAME LAST SUFFIX De Leon | |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1409 South 9th Avenue Edinburg, TX 78541 | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1409 South 9th Avenue Edinburg, TX 78541 | |
| 8 CAMPAIGN TREASURER PHONE | | AREA CODE PHONE NUMBER EXTENSION (956) 393-9902 | |
| 9 REPORT TYPE | | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff | |
| 10 PERIOD COVERED | | Month Day Year Month Day Year 01/01/2024 THROUGH 06/30/2024 | |
| 11 ELECTION | | ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 11/05/2024 <input checked="" type="checkbox"/> General <input type="checkbox"/> Special | |

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

| | |
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| 12 COMMITTEE NAME Capitol Republican Women PAC | 13 Filer ID (Ethics Commission Filers) 00080668 |
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| | | |
|---|--|--------------|
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported |
| | | B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

| | | |
|-------------------------------|--|-------------|
| 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 0.00 |
| | <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold | |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 4,495.93 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 2,966.93 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 3,825.29 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Ms. Maricela De Leon

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - GPAC

| | | |
|--|---|---|
| 17 COMMITTEE NAME Capitol Republican Women PAC | | 18 Filer ID (Ethics Commission Filers) 00080668 |
| 19 SCHEDULE SUBTOTALS | | SUBTOTAL AMOUNT |
| | NAME OF SCHEDULE | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 4,495.93 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 5. | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 6. | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 7. | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 8. | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 9. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 10. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 2,966.93 |
| 11. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 13. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 14. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 15. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/8 Rpt: 4/16 |
| 2 FILER NAME Capitol Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00080668 |
| 4 Date 02/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRETT, PAMELA <hr/> 6 Contributor address; City; State; Zip Code FERRIS, TX 75125 | 7 Amount of Contribution (\$) \$30.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 02/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernhardt, Cassie <hr/> Contributor address; City; State; Zip Code Austin, TX 78759 | Amount of Contribution (\$) \$52.30 |
| Principal occupation / Job title (See Instructions) Executive Director of Development and Communication | | Employer (See Instructions) The Universtiy of Texas at Austin |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay, Lauren <hr/> Contributor address; City; State; Zip Code Austin, TX 78704 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) Communications Director | | Employer (See Instructions) Texas Oil & Gas Assoc |
| Date 01/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel Howell, Cassie (Mrs.) <hr/> Contributor address; City; State; Zip Code Austin, TX 78729 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) State Employee | | Employer (See Instructions) STATE OF TEXAS |
| Date 01/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Donna <hr/> Contributor address; City; State; Zip Code Austin, TX 78711 | Amount of Contribution (\$) \$78.44 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/8 Rpt: 5/16 |
| 2 FILER NAME Capitol Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00080668 |
| 4 Date 01/24/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeWitt, Cathy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78750 | 7 Amount of Contribution (\$) \$30.00 |
| 8 Principal occupation / Job title (See Instructions) Lobbyist | | 9 Employer (See Instructions) Schlueter Group |
| Date 02/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denison, Sarah <hr/> Contributor address; City; State; Zip Code Austin, TX 78759 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) State Employee | | Employer (See Instructions) State of Texas |
| Date 02/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engman, Victoria <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Political Contractor | | Employer (See Instructions) Self-Employed |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freel, Jennifer <hr/> Contributor address; City; State; Zip Code Austin, TX 78735 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Jackson Walker LLP |
| Date 01/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Jerri Ann <hr/> Contributor address; City; State; Zip Code Austin, TX 78739 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) Principal | | Employer (See Instructions) Drive Communications |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/8 Rpt: 6/16 |
| 2 FILER NAME Capitol Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00080668 |
| 4 Date 02/06/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hock, Stacy | 7 Amount of Contribution (\$) \$30.00 |
| 6 Contributor address; City; State; Zip Code Austin, TX 78746 | | |
| 8 Principal occupation / Job title (See Instructions) Private Investor | | 9 Employer (See Instructions) Self |
| Date 02/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Joan | Amount of Contribution (\$) \$30.00 |
| Contributor address; City; State; Zip Code Temple, TX 76502 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones Smith, Tiffany | Amount of Contribution (\$) \$45.00 |
| Contributor address; City; State; Zip Code San Antonio, TX 78230 | | |
| Principal occupation / Job title (See Instructions) President and CEO | | Employer (See Instructions) Texas Kidney Foundation |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keel, Judge Mary Lou | Amount of Contribution (\$) \$52.40 |
| Contributor address; City; State; Zip Code Austin, TX 78746 | | |
| Principal occupation / Job title (See Instructions) Judge | | Employer (See Instructions) Texas Court of Criminal Appeals |
| Date 03/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaRue Gerdes, Sam | Amount of Contribution (\$) \$31.56 |
| Contributor address; City; State; Zip Code Smithville, TX 78957 | | |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Self Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/8 Rpt: 7/16 |
| 2 FILER NAME Capitol Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00080668 |
| 4 Date 02/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lattimore, Ann <hr/> 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613 | 7 Amount of Contribution (\$) \$30.00 |
| 8 Principal occupation / Job title (See Instructions) Entrepreneur | | 9 Employer (See Instructions) Excelsior Enterprise |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laue, Susan <hr/> Contributor address; City; State; Zip Code Leander, TX 78641 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Leadership Resources & Development | | Employer (See Instructions) Consultant |
| Date 01/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Cheryl <hr/> Contributor address; City; State; Zip Code Austin, TX 78723 | Amount of Contribution (\$) \$52.40 |
| Principal occupation / Job title (See Instructions) Architectural Designer & Land Planner, Graphic Designer and | | Employer (See Instructions) OmniaHouse Design LLC |
| Date 02/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Amanda <hr/> Contributor address; City; State; Zip Code Austin, TX 78749 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Lobbyist | | Employer (See Instructions) Williams Public Affaris |
| Date 03/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Melissa <hr/> Contributor address; City; State; Zip Code Deer Park, TX 77536 | Amount of Contribution (\$) \$31.56 |
| Principal occupation / Job title (See Instructions) CTE Teacher | | Employer (See Instructions) Deer Park ISD |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/8 Rpt: 8/16 |
| 2 FILER NAME Capitol Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00080668 |
| 4 Date 02/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montoya, Anna Lisa <hr/> 6 Contributor address; City; State; Zip Code Buda, TX 78610 | 7 Amount of Contribution (\$) \$31.56 |
| 8 Principal occupation / Job title (See Instructions) Legislative Liaison | | 9 Employer (See Instructions) Texas General Land Office |
| Date 02/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Ashley <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665 | Amount of Contribution (\$) \$31.56 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Erben & Yarbrough |
| Date 02/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mote, Lia <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613 | Amount of Contribution (\$) \$48.95 |
| Principal occupation / Job title (See Instructions) Sr. Proposal and Marketing Strategist | | Employer (See Instructions) Trusted Capital Group |
| Date 03/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nevonen, Logan <hr/> Contributor address; City; State; Zip Code Addison, TX 75001 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) Grassroots Manager | | Employer (See Instructions) National Federation of Independent Business |
| Date 01/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Sarah <hr/> Contributor address; City; State; Zip Code Austin, TX 78704 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) Vice President | | Employer (See Instructions) CB Capitol |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/8 Rpt: 9/16 |
| 2 FILER NAME Capitol Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00080668 |
| 4 Date 02/23/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivarez, Lizeth <hr/> 6 Contributor address; City; State; Zip Code Laredo, TX 78045 | 7 Amount of Contribution (\$) \$30.00 |
| 8 Principal occupation / Job title (See Instructions) Teacher | | 9 Employer (See Instructions) Region One ESC |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Alicia <hr/> Contributor address; City; State; Zip Code Austin, TX 78753 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) State Employee | | Employer (See Instructions) State of Texas |
| Date 02/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prince, Rachel <hr/> Contributor address; City; State; Zip Code Austin, TX 78767 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) Independent Consultant | | Employer (See Instructions) NYR Organic |
| Date 02/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Megan <hr/> Contributor address; City; State; Zip Code Austin, TX 78724 | Amount of Contribution (\$) \$31.56 |
| Principal occupation / Job title (See Instructions) Political Operative | | Employer (See Instructions) Self Employed |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rister, Amy (Mrs.) <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) State Employee | | Employer (See Instructions) State of Texas |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/8 Rpt: 10/16 |
| 2 FILER NAME Capitol Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00080668 |
| 4 Date 03/01/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stratton, Jen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78717 | 7 Amount of Contribution (\$) \$31.56 |
| 8 Principal occupation / Job title (See Instructions) State Employee | | 9 Employer (See Instructions) State of Texas |
| Date 01/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tagle, Veronica <hr/> Contributor address; City; State; Zip Code Forsan, TX 79733 | Amount of Contribution (\$) \$31.56 |
| Principal occupation / Job title (See Instructions) Band Director | | Employer (See Instructions) Forsan ISD |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanner, Vanessa <hr/> Contributor address; City; State; Zip Code Austin, TX 78736 | Amount of Contribution (\$) \$31.56 |
| Principal occupation / Job title (See Instructions) Chief of Staff | | Employer (See Instructions) State of Texas |
| Date 04/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans For Lawsuit Reform PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$3,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Arnam, Catherine <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613 | Amount of Contribution (\$) \$31.56 |
| Principal occupation / Job title (See Instructions) Homemaker | | Employer (See Instructions) Homemaker |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/8 Rpt: 11/16 |
| 2 FILER NAME Capitol Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00080668 |
| 4 Date 02/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Tabatha <hr/> 6 Contributor address; City; State; Zip Code Manor, TX 78653 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) State Employee | | 9 Employer (See Instructions) State of Texas |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Venable, Peggy <hr/> Contributor address; City; State; Zip Code Austin, TX 78729 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) State Employee | | Employer (See Instructions) State of Texas |
| Date 01/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal Salvo, Mandi <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78410 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) State Employee | | Employer (See Instructions) State of Texas |
| Date 05/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Michelle <hr/> Contributor address; City; State; Zip Code Austin, TX 78758 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) Budget Officer | | Employer (See Instructions) Governor Office |
| Date 02/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rachel <hr/> Contributor address; City; State; Zip Code Houston, TX 77009 | Amount of Contribution (\$) \$52.40 |
| Principal occupation / Job title (See Instructions) Fundraising | | Employer (See Instructions) Imperium |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 1/5 Rpt: 12/16 | 2 FILER NAME Capitol Republican Women PAC | 3 Filer ID (Ethics Commission Filers) 00080668 |
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| | |
|-----------------------------|-----------------------------------|
| 4 Date 01/31/2024 | 5 Payee name Chase Bank |
|-----------------------------|-----------------------------------|

| | |
|--|---|
| 6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 221 W 6th Street Austin, TX 78701 |
|--|---|

| | | |
|---------------------------------|---|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BANK MONTHLY FEE |
|---------------------------------|---|--|

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

| | |
|--------------------|--------------------------|
| Date 02/29/2024 | Payee name Chase Bank |
|--------------------|--------------------------|

| | |
|---|--|
| Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 221 W 6th Street Austin, TX 78701 |
|---|--|

| | | |
|------------------------|--|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MONTHLY FEE |
|------------------------|--|--|

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

| | |
|--------------------|---|
| Date 01/11/2024 | Payee name MAILCHIMP *MONTHLY MAILCHIMP.COM GA |
|--------------------|---|

| | |
|---|---|
| Amount (\$) \$33.05 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE 5000 Atlanta, GA 30308 |
|---|---|

| | | |
|------------------------|--|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MONTHLY PAYMENT |
|------------------------|--|--|

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: Sch: 2/5 Rpt: 13/16 | 2 FILER NAME Capitol Republican Women PAC | 3 Filer ID (Ethics Commission Filers) 00080668 |
| 4 Date 03/11/2024 | 5 Payee name MAILCHIMP *MONTHLY MAILCHIMP.COM GA | |
| 6 Amount (\$) \$33.05 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE 5000 Atlanta, GA 30308 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MONTHLY FEE |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/11/2024 | Payee name MAILCHIMP *MONTHLY MAILCHIMP.COM GA | |
| Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE 5000 Atlanta, GA 30308 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MONTHLY FEES |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 05/13/2024 | Payee name MAILCHIMP *MONTHLY MAILCHIMP.COM GA | |
| Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE 5000 Atlanta, GA 30308 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MONTHLY FEE |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 3/5 Rpt: 14/16 | 2 FILER NAME Capitol Republican Women PAC | 3 Filer ID (Ethics Commission Filers) 00080668 |
|--|---|--|

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| 4 Date 06/11/2024 | 5 Payee name MAILCHIMP *MONTHLY MAILCHIMP.COM GA |
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| 6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE 5000 Atlanta, GA 30308 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MONTHLY FEE |
|---------------------------------|--|---|

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

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| Date 01/08/2024 | Payee name TFRW |
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| Amount (\$) \$20.20 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 13740 N HWY 183 St. J4 Austin, TX 78750 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OFFICE MARKETING EXPENSE. |
|-------------------------------|--|---|

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

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|--------------------|--------------------|
| Date 01/08/2024 | Payee name TFRW |
|--------------------|--------------------|

| | |
|--|--|
| Amount (\$) \$379.50 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 13740 N HWY 183 St. J4 Austin, TX 78750 |
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|-------------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MARKETING EXPENSE |
|-------------------------------|--|---|

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

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 4/5 Rpt: 15/16 | 2 FILER NAME Capitol Republican Women PAC | 3 Filer ID (Ethics Commission Filers) 00080668 |
| 4 Date 03/01/2024 | 5 Payee name TFRW | |
| 6 Amount (\$) \$885.50 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 13740 N HWY 183 St. J4 Austin, TX 78750 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEMBERSHIP DUES |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/17/2024 | Candidate/Officeholder name VENMO | |
| Amount (\$) \$1,300.00 <input type="checkbox"/> Expenditure from corporate funds | Office sought 117 Barrow St NEW YORK, NY 10014 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEMBERSHIP DUES |
| Office held | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/25/2024 | Candidate/Officeholder name Wordpress | |
| Amount (\$) \$70.17 <input type="checkbox"/> Expenditure from corporate funds | Office sought 60 29th Street 343 San Francisco, CA 94110 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE FEE |
| Office held | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 5/5 Rpt: 16/16 | 2 FILER NAME Capitol Republican Women PAC | 3 Filer ID (Ethics Commission Filers) 00080668 |
| 4 Date 06/12/2024 | 5 Payee name ZOOM.US 888-799-9666 WWW.ZOOM.US CA | |
| 6 Amount (\$) \$170.46 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ONLINE SERVICE PAYMENT |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |