FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00080382 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Strong Republican Women Date Received **ELECTRONICALLY FILED** 07/27/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** PO Box 543 Change of Address Argyle, TX 76226-0543 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Frederick C. NAME Date Processed **NICKNAME** LAST **SUFFIX** Date Imaged Tate CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 959 W Glade Rd STREET **ADDRESS** (Residence or Business) Hurst, TX 76054 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** PO Box 953 MAILING **ADDRESS** Change of Address Colleyville, TX 76034 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (469) 290-7500 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 X August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 06/26/2024 07/25/2024

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME Texas Strong Republ	ican Women		2	13 Filer ID 00080382	(Ethics Commission Filers)
				00000302	
ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
	, , , , , , , , , , , , , , , , , , , ,				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2 Magauraa	A. Supported			
	Measures (Describe by date and location	A. Supported			
	of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
5 CONTRIBUTION		D POLITICAL CONTRIBU			
TOTALS	CONTRIBUTIONS N	OR GUARANTEES OF LO MADE ELECTRONICALLY qualifies for the higher itemize)	\$	0.00
	2. TOTAL POLITICA				
	(OTHER THAN PLE	DGES, LOANS, OR GUAF	RANTEES OF LOANS)	\$	6,657.14
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITU	JRES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	800.82
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN		AINED AS OF THE LAST I	DAY \$	31,967.54
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTST REPORTING PERIOD	ANDING LOANS AS OF T	HE \$	0.00
.6 AFFIDAVIT	<u> </u>			<u> </u>	
		true and co	affirm, under penalty of per rrect and includes all inforn 15, Election Code.	jury, that the a	accompanying report is d to be reported by me
			Erodoric	k C. Tate	
			Signature of Can		uror .
			Signature of Can	npaign measu	irei
AFFIX NOTAF	RY STAMP / SEAL ABOVE				
Sworn to and subscribe	ed before me, by the said _		, th	is the	day
of	, 20, to certify	which, witness my hand ar	nd seal of office.		
Signature of officer	administering oath	Printed name of officer ac	dministering oath	Title of office	cer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

					3 of 25
17 CO	MMITTE	E NAME	18 Filer ID	(Ethics Comm	nission Filers)
Tex	as Str	ong Republican Women	00080382	`	,
		S SUBTOTALS			
l	ME OF	SUBTOT	AL AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	6,516.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	141.14
3.	П	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
	Ш			ļ	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	ıR	\$	
ļ -	Ш	ORGANIZATION) 3	
_		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	_	
5.	Ш	LABOR ORGANIZATION		\$	
6.	Ш	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
		COLIEDURE CAN MONETARY CURRORT FROM CORRORATION OF LAROR			
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.	П	SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	800.82
				Ψ	000.02
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			
11.	Ш	SCHEDULE FZ. UNFAID INCORRED OBLIGATIONS		\$	
40			2110	_	
12.	Ш	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	JNS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	
I					

	MONET	ARY POLITICAL CO	ONTRIBUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how t	o complete this for	m.	1	Total pages Schedule A1: Sch: 1/7 Rpt: 4/25	
2	FILER NAME Texas Strong	g Republican Women			3	Filer ID (Ethics Commission 00080382	on Filers)
4	Date 07/03/2024	6 Contributor address; City; State			7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Flower Mound, TX 75022 pation / Job title (See Instructions)	9	Employer (See Instructions	 - S)		
	Manufacturir			Self			
	Date 07/16/2024	Full name of contributor Darby, Susan Darby Contributor address; City; State)	•	Amount of Contribution (\$)	\$50.00
	Data disal asses	Denton, TX 76207		Fanda an (Carlos bastos etiana	<u></u>		
	Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 07/24/2024	Full name of contributor Dolansky, Mary Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)	•	Amount of Contribution (\$)	\$100.00
	Dringinal accu	Roanoke, TX 76262 pation / Job title (See Instructions)		Employer (See Instructions	<u>'</u>		
	Financial Ad			Ameriprise	>)		
	Date 07/24/2024	Full name of contributor Dyer, Lisa Contributor address; City; State Denton, TX 76207	out-of-state PAC (ID#: e; Zip Code)		Amount of Contribution (\$)	\$250.00
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 07/22/2024	Full name of contributor Eaton, Julie Contributor address; City; State DENTON, TX 76207	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
			,				

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to	o complete this for	n.	1	Total pages Schedule A1: Sch: 2/7 Rpt: 5/25	
2	FILER NAME Texas Strong	g Republican Women			3	Filer ID (Ethics Commission 00080382	n Filers)
4	Date 07/16/2024	5 Full name of contributor Hendrickson, Lisa6 Contributor address; City; State)	7	Amount of Contribution (\$)	\$100.00
8	Dringing oggu	Argyle, TX 76226	lo.	Employer (See Instructions			
•	CM	pation / Job title (See Instructions)	9	Employer (See Instructions Self	·)		
Date Full name of contributor out-of-state PAC (ID#:) 07/23/2024 Hillyer, Jean Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00			
	Principal occu	Double Oak, TX 75077 pation / Job title (See Instructions)		Employer (See Instructions	·,		
	Retired	pation / 305 title (See instructions)		Retired	•)		
	Date 07/25/2024	Full name of contributor Huffman, John Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$250.00
		Southlake, TX 76092					
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Black Door Renovation	5)		
	Date 07/07/2024	Full name of contributor JONES, DERBHA Contributor address; City; State Denton, TX 76206	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$15.00
	Principal occu District Judg	pation / Job title (See Instructions)		Employer (See Instructions State of Texas	<u> </u>		
	Date 07/01/2024	Full name of contributor Johnson, Jim Contributor address; City; State Plano, TX 75024	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$250.00
	•	pation / Job title (See Instructions) e/Attorney & CPA		Employer (See Instructions State of Texas	5)		
			L				

	MONET	ARY POLITICAL CONTRIBUT	ION	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete thi	s for	m.	1	Total pages Schedule A1: Sch: 3/7 Rpt: 6/25	
2	FILER NAME Texas Strong	g Republican Women			3	Filer ID (Ethics Commissio 00080382	n Filers)
4	Date 07/18/2024	 Full name of contributor out-of-state PAC (II Keller, Elizabeth Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$30.00
8	Principal occu Self-Employe	Double Oak, TX 75077 pation / Job title (See Instructions) ed	9	Employer (See Instructions Self-Employed	<u> </u> s)		
	Date 07/22/2024	Full name of contributor out-of-state PAC (If Keller, Elizabeth Contributor address; City; State; Zip Code Double Oak, TX 75077)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Self-Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Self-Employed	<u>I</u> S)		
	Date 07/22/2024	Full name of contributor out-of-state PAC (II Kerestine, Julia Contributor address; City; State; Zip Code	D#:)	•	Amount of Contribution (\$)	\$250.00
	Principal occu Attorney	Lantana, TX 76226 pation / Job title (See Instructions)		Employer (See Instructions Self-Employed	<u> </u> s)		
	Date 07/25/2024	Full name of contributor out-of-state PAC (II King, Frank Contributor address; City; State; Zip Code Denton, TX 76207)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u>l</u> S)		
	Date 07/17/2024	Full name of contributor out-of-state PAC (II LaMastra, Soroya Contributor address; City; State; Zip Code North Richland Hills, TX 76182) D#:		•	Amount of Contribution (\$)	\$50.00
	Principal occu Sales	pation / Job title (See Instructions)		Employer (See Instructions First American Home W		anty	
			•				

	MONET	ARY POLITICAL CONTRIB	BUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complet	e this for	n.	1	Total pages Schedule A1: Sch: 4/7 Rpt: 7/25	
2	FILER NAME Texas Strong	g Republican Women			3	Filer ID (Ethics Commission 00080382	n Filers)
4	Date 07/12/2024	 Full name of contributor out-of-state F Martin, Barbara Contributor address; City; State; Zip Code 	-)	7	Amount of Contribution (\$)	\$150.00
8	Principal occu Retired	Denton, TX 76207 pation / Job title (See Instructions)	9	Employer (See Instructions Retired	<u> </u> s)		
	Date 07/01/2024	Contributor address; City; State; Zip Code	-)		Amount of Contribution (\$)	\$500.00
	Principal occu	Sanger, TX 76266 pation / Job title (See Instructions)		Employer (See Instructions Rock on Framing Inc	<u> </u> s)		
	Date 07/05/2024	Full name of contributor out-of-state F Nelson, Sean Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	Trophy Club, TX 76262 pation / Job title (See Instructions)		Employer (See Instructions Human Capital Partners	•	=\M	
	Date 07/19/2024	Full name of contributor out-of-state F O'Neill, Angela Contributor address; City; State; Zip Code	-)		Amount of Contribution (\$)	\$1.00
	Principal occu Substitute Te	pation / Job title (See Instructions) eacher		Employer (See Instructions Self Employed	<u> </u> s)		
	Date 07/18/2024	Full name of contributor out-of-state F Pausman, Karen Contributor address; City; State; Zip Code Denton, TX 76210)		Amount of Contribution (\$)	\$50.00
	Principal occu Healthcare S	pation / Job title (See Instructions) Sales Agent		Employer (See Instructions Enrollment Store	5)		

	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to com	plete this forr	n.	1	Total pages Schedule A1: Sch: 5/7 Rpt: 8/25	
2	FILER NAME Texas Strong	g Republican Women			3	Filer ID (Ethics Commission 00080382	n Filers)
4	Date 07/23/2024	 Full name of contributor out-of-s Ramirez, Robert Contributor address; City; State; Zip Co)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Lake Dallas, TX 75065 pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Judge			Denton County			
	Date 07/22/2024	Full name of contributor out-of-s Rettig, Cynthia Contributor address; City; State; Zip Co)		Amount of Contribution (\$)	\$100.00
		Northlake, TX 76226					
	Principal occu Homemaker	pation / Job title (See Instructions)		Employer (See Instructions Homemaker	()		
	Date 07/04/2024	Full name of contributor out-of-s Roszell, Vandolyn Contributor address; City; State; Zip Co	state PAC (ID#:			Amount of Contribution (\$)	\$250.00
		Keller, TX 76248					
	Principal occu CPA	pation / Job title (See Instructions)		Employer (See Instructions Vandolyn Roszell, PC C			
	Date 07/10/2024	Steckler, Nancy)		Amount of Contribution (\$)	\$50.00
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Business Owner	5)		
	Date 07/19/2024	Stimek, Mary	state PAC (ID#:)		Amount of Contribution (\$)	\$150.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
			1				

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 6/7 Rpt: 9/25	
2	FILER NAME Texas Stron	g Republican Women		3	Filer ID (Ethics Commission 00080382	n Filers)
4	Date 07/10/2024	5 Full name of contributor	<i>t</i> :)	7	Amount of Contribution (\$)	\$600.00
8	Principal occu	Auston, TX 78717 pation / Job title (See Instructions)	9 Employer (See Instructions	 		
Date Full name of contributor out-of-state PAC (ID#:) 77/19/2024 Tafoya, Judith Contributor address; City; State; Zip Code Denton, TX 76207			Amount of Contribution (\$)	\$100.00		
Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired		5)				
	Date 07/25/2024	Full name of contributor out-of-state PAC (ID# Tan, Parker Campaign Contributor address; City; State; Zip Code	<u>†:)</u>		Amount of Contribution (\$)	\$250.00
	Principal occu State Senato	Plower Mound, TX 75027 Ipation / Job title (See Instructions) Or	Employer (See Instructions State of Texas	<u> </u> ;)		
	Date 07/21/2024	Full name of contributor out-of-state PAC (ID# Tate, Jill Contributor address; City; State; Zip Code Colleyville, TX 76034			Amount of Contribution (\$)	\$100.00
	Principal occu Homemaker	pation / Job title (See Instructions)	Employer (See Instructions Self-employed	<u>(</u>		
Date Full name of contributor out-of-state PAC (ID#:) 07/05/2024 Tiffany, Jeannette Contributor address; City; State; Zip Code Trophy Club, TX 76262			Amount of Contribution (\$)	\$50.00		
	Principal occu Mayor	pation / Job title (See Instructions)	Employer (See Instructions Town of Trophy Club	5)		

	MONET	ARY POLITICAL CONTRIBI	UTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 7/7 Rpt: 10/25	
2	FILER NAME Texas Strong	g Republican Women			3	Filer ID (Ethics Commissio 00080382	n Filers)
4	Date 07/10/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Denton, TX 76207 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)		
Retired Date Full name of contributor out-of-state PAC (ID#:) 07/03/2024 Wickert, Elizabeth Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$100.00			
	Principal occu Retired	Port Angeles, WA 98362 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 06/27/2024	Full name of contributor out-of-state PA Wiginton, Laurie Contributor address; City; State; Zip Code	AC (ID#:			Amount of Contribution (\$)	\$70.00
	Principal occu	Denton, TX 76207 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 07/19/2024	Full name of contributor out-of-state PA Wiginton, Laurie Contributor address; City; State; Zip Code Denton, TX 76207		Retired		Amount of Contribution (\$)	\$150.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 07/02/2024	Full name of contributor out-of-state PA Zilinsky, Peggy Contributor address; City; State; Zip Code Denton, TX 76207)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
			•				

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 11/25 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Texas Strong Republican Women 00080382 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 07/05/2024 Tate, Fred \$141.14 Campaign Bookkeeping 7 Contributor address; City; State; Zip Code Services & Support Hurst, TX 76054 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) CFO Shield, LLC Managing Director 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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

Credit Card Payment	The Instruction Guide explains how to complete	, , , , , , , , , , , , , , , , , , , ,
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)
Sch: 1/14 Rpt: 12/25	Texas Strong Republican Women	00080382
4 Date	5 Payee name	
07/01/2024	Anedot Inc.	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$10.30	1340 Poydras Street, Suite 1770	
Expenditure from corporate funds	New Orleans, LA 70112	
8 PURPOSE OF	l ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	Description
EXPENDITURE	Fees L	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Online Donation Processing Fee
		3 - 1
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI		
Date	Payee name	
07/01/2024	Anedot Inc.	
Amount (\$)	Payee address; City; State; Zip Code	
\$20.30	1340 Poydras Street, Suite 1770	
Expenditure from corporate funds	New Orleans, LA 70112	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Online Donation Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI		Office field
Date	Payee name	
07/02/2024	Anedot Inc.	
Amount (\$)	Payee address; City; State; Zip Code	
\$4.30	1340 Poydras Street, Suite 1770	
Expenditure from corporate funds	New Orleans, LA 70112	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
LA LABITORL		Check if Austin, TX, officeholder living expense
		Online Donation Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

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	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/14 Rpt: 13/25	Texas Strong Republican Women 00080382
4 Date	5 Payee name
07/03/2024	Anedot Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4.30	1340 Poydras Street, Suite 1770
— Foresedit ve from	
Expenditure from corporate funds	New Orleans, LA 70112
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
	Online Donation Processing Fee
	Chimic Bollagott Foocooming Foo
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
07/03/2024	Anedot Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$40.30	1340 Poydras Street, Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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 Online Donation Processing Fee
	Offline Donation Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Davies same
07/04/2024	Payee name Anedot Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$10.30	1340 Poydras Street, Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
PURPOSE	1
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
	Online Donation Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

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

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/14 Rpt: 14/25	Texas Strong Republican Women 00080382
4 Date	5 Payee name
07/05/2024	Anedot Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4.30	1340 Poydras Street, Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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
	Online Donation Processing Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
07/05/2024	Anedot Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$2.30	1340 Poydras Street, Suite 1770
42.00	10 to to dyalace earlies at the
Expenditure from corporate funds	New Orleans, LA 70112
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 Online Donation Processing Fee
	Offinite Doffation 1 Toccssing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	o
Data	Davisa sama
Date 07/07/2024	Payee name Anedot Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$0.90	1340 Poydras Street, Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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
	Online Donation Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
2	

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		Legal Services The Instruction Guide explains		es/Contract Labor		OTHER (enter a	category not listed above)	
1 Total pages Schedule F1:	2 FILER NAM	E			3	Filer ID	(Ethics Commission Filers)	_
Sch: 4/14 Rpt: 15/25	Texas Stro	ng Republican Women				00080382		
4 Date	5 Payee name	9						
07/12/2024	Anedot Inc							
6 Amount (\$)	7 Payee addre	ess; City; State	e; Zip Code	?				_
\$6.30	1340 Poyd	ras Street, Suite 1770						
Expenditure from corporate funds	New Orlea	ns, LA 70112						
8 PURPOSE OF		See Categories listed at the top of this sci	hedule) (t) Description				
EXPENDITURE	Fees					ide of Texas. Com , officeholder living	plete Schedule T.	
				Online Donat				
Complete ONLY if direct expenditure to benefit C/OF		ficeholder name	Office sough	t		Office he	eld	
Date	Payee name)						
07/16/2024	Anedot Inc							
Amount (\$)	Payee addre	ess; City; State	e; Zip Code)				_
\$4.30	1340 Poyd	ras Street, Suite 1770						
Expenditure from corporate funds	New Orlea	ns, LA 70112						
PURPOSE OF	(a) Category (S	See Categories listed at the top of this sci	hedule) (b) Description				
EXPENDITURE	Fees			<u> </u>		ide of Texas. Com , officeholder living	plete Schedule T.	
				Online Donat				
				010 2 01.ta				
Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		ficeholder name	Office sough	t		Office he	eld	
Date	Payee name)						_
07/16/2024	Anedot Inc							
Amount (\$)	Payee addre	ess; City; State	e; Zip Code	<u> </u>				_
\$2.30	1 1	ras Street, Suite 1770	, ,					
·	_	,						
Expenditure from corporate funds	New Orlea	ns, LA 70112						
PURPOSE	(a) Category (S	See Categories listed at the top of this sc	hedule) (b) Description				
OF EXPENDITURE	Fees			<u> </u>			plete Schedule T.	
				Online Donat		, officeholder living		
					uon	i i iocessiily	i CG	
Complete ONLY if direct	Candidate/Of	ficeholder name	Office sough	t		Office he	əld	
expenditure to benefit C/O		noonolaan name	Cinco Sough			Office He	oiu .	

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee Legal Services The Instruction Guide explains		ages	es/Contract Labor OTHER (enter a category not listed above)
<u> </u>	T	1_		now to con	пріс	
1	Total pages Schedule F1:	2				3 Filer ID (Ethics Commission Filers)
	Sch: 5/14 Rpt: 16/25		Texas Strong Republican Women			00080382
4	Date	5	Payee name			
	07/17/2024		Anedot Inc.			
6	Amount (\$)	7	Payee address; City; State;	; Zip Coo	de.	
ľ	\$2.30	ľ	1340 Poydras Street, Suite 1770	,р осс		
	Ψ2.30		1540 F Oydras Street, Suite 1770			
Ш	Expenditure from					
ш	corporate funds		New Orleans, LA 70112			
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)) Description
	OF EXPENDITURE		Fees	ĺ		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE					Check if Austin, TX, officeholder living expense
						Online Donation Processing Fee
	Complete ONLY if direct		Candidate/Officeholder name C	Office soug	ght	Office held
	expenditure to benefit C/OI	Н				
	Date	Π	Payee name			
	07/18/2024		Anedot Inc.			
		┡			_	
	Amount (\$)			; Zip Coo	de	
	\$2.30		1340 Poydras Street, Suite 1770			
_	- Evpanditura from					
Ш	Expenditure from corporate funds		New Orleans, LA 70112			
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	andula)	(b)) Description
	OF	()	Category (See Categories listed at the top of this sch	ledule)	(-,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		1 003			Check if Austin, TX, officeholder living expense
						Online Donation Processing Fee
	Complete ONLY if direct		Candidate/Officeholder name C	Office soug	ht	Office held
	expenditure to benefit C/OI	Н				
	Data	_				
	Date		Payee name			
	07/18/2024		Anedot Inc.			
	Amount (\$)		• • • • • • • • • • • • • • • • • • • •	; Zip Coo	de	
	\$1.50		1340 Poydras Street, Suite 1770			
	Expenditure from corporate funds		New Orleans, LA 70112			
	PURPOSE	(2)	10.	1	(h)) Description
	OF	(۵)	Category (See Categories listed at the top of this sch	nedule)	(D)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Fees			Check if Austin, TX, officeholder living expense
						Online Donation Processing Fee
						Ç
	Complete ONLY if direct	Ц,	Candidate/Officeholder name C	Office soug	tht	Office held
	expenditure to benefit C/OI		Sandidate/Officeriolder Harrie	Jinee Soug	JIIL	Onice Held

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	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: 6/14 Rpt: 17/25	Texas Strong Republican Women 00080382
4 Date	5 Payee name
07/19/2024	Anedot Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$0.34	1340 Poydras Street, Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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 Online Donation Processing Fee
	Chime Bondaon Processing Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date	Payee name
07/19/2024	Anedot Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$6.30	1340 Poydras Street, Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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
	Online Donation Processing Fee
2 1 2 2 1 1 2 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/19/2024	Anedot Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$4.30	1340 Poydras Street, Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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.
EAFENDITUKE	Check if Austin, TX, officeholder living expense
	Online Donation Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
CAPCHARLINE TO DETICITE C/OI	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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: 7/14 Rpt: 18/25	Texas Strong Republican Women 00080382
4 Date	5 Payee name
07/19/2024	Anedot Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6.30	1340 Poydras Street, Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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
	Online Donation Processing Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Dayso nama
07/21/2024	Payee name Anedot Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$4.30	1340 Poydras Street, Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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
	Online Donation Processing Fee
0 1 0 0 1 0 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
'	
Date	Payee name
07/22/2024	Anedot Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$10.30	1340 Poydras Street, Suite 1770
— Forest diture from	
Expenditure from corporate funds	New Orleans, LA 70112
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
	Online Donation Processing Fee
0 1 0 0 1 0 0 1 0 0 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
•	

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	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: 8/14 Rpt: 19/25	Texas Strong Republican Women 00080382
4 Date	5 Payee name
07/22/2024	Anedot Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2.30	1340 Poydras Street, Suite 1770
Expenditure from	New Orleans, LA 70112
corporate funds	1
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
	Online Donation Processing Fee
	3
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Dete	
Date	Payee name
07/22/2024	Anedot Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$4.30	1340 Poydras Street, Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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
	Online Donation Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/22/2024	Anedot Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$4.30	1340 Poydras Street, Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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
	Online Donation Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experiorare 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/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/14 Rpt: 20/25	Texas Strong Republican Women 00080382
4 Date	5 Payee name
07/23/2024	Anedot Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$20.30	1340 Poydras Street, Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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 Online Donation Processing Fee
	Offilite Donation Processing Fee
• • • • • • • • • • • • • • • • • • • •	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/23/2024	Anedot Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$20.30	1340 Poydras Street, Suite 1770
Expenditure from corporate funds	New Orleans, LA 70112
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
	Online Donation Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to benefit 6/6/	<u> </u>
Date	Payee name
07/24/2024	Anedot Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$10.30	1340 Poydras Street, Suite 1770
410.00	10 to to dyardo caroot, care 11 to
Expenditure from corporate funds	New Orleans, LA 70112
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Online Donation Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Committee 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 h	ow to complete this form.	
1 Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
Sch: 10/14 Rpt: 21/25	Texas Strong Republican Women		00080382
	5 Payee name		
07/24/2024	Anedot Inc.		
\$4.30	7 Payee address; City; State; 1340 Poydras Street, Suite 1770	Zip Code	
Expenditure from corporate funds	New Orleans, LA 70112		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this scheres	Check if travel of Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense ion Processing Fee
Complete ONLY if direct expenditure to benefit C/OH		ffice sought	Office held
Date	Payee name		
07/25/2024	Anedot Inc.		
Amount (\$)	Payee address; City; State;	Zip Code	
\$4.30	1340 Poydras Street, Suite 1770		
Expenditure from corporate funds	New Orleans, LA 70112		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this scheres	Check if travel of Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense ion Processing Fee
Complete ONLY if direct expenditure to benefit C/OH		ffice sought	Office held
Date 07/25/2024	Payee name Anedot Inc.		
Amount (\$) \$10.30	Payee address; City; State; 1340 Poydras Street, Suite 1770	Zip Code	
Expenditure from corporate funds	New Orleans, LA 70112		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this scheres	Check if travel of Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense ion Processing Fee
Complete ONLY if direct expenditure to benefit C/OH		ffice 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 Filers)	
Sch: 11/14 Rpt: 22/25	Texas Strong Republican Women 00080382	
4 Date	5 Payee name	
07/25/2024	Anedot Inc.	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$10.30	1340 Poydras Street, Suite 1770	
- "		
Expenditure from corporate funds	New Orleans, LA 70112	
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 Online Donation Processing Fee	
	Offilite Doffation Flocessing Fee	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
Date	Payee name	
06/26/2024	Constant Contact	
Amount (\$)	Payee address; City; State; Zip Code	
\$24.53	1601 Trapelo Road	
Expenditure from corporate funds	Waltham, MA 02451	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense	
EXI ENDITORE	Check if Austin, TX, officeholder living expense	
	Email Advertising	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experialitate to benefit 6/01		
Date	Payee name	
07/16/2024	Deluxe Corporation	
Amount (\$)	Payee address; City; State; Zip Code	
\$29.75	801 S. Marquette Ave.	
+- 5.10	1	
Expenditure from corporate funds	Minneapolis, MN 55402	
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	
	Fee for Printing Checks	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	H .	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 12/14 Rpt: 23/25	Texas Strong Republican Women 00080382
4 Date	5 Payee name
07/02/2024	Google LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$7.68	1600 Amphitheatre Pkwy
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Google G-Suite Subscription
	Google G-Suite Subscription
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
07/11/2024	Lundy, Jennifer
Amount (\$)	Payee address; City; State; Zip Code
\$46.15	415 West Couts Street
Expenditure from corporate funds	Weatherford, TX 76086
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Reimbursment - Jennifer Lundy/"Marriott"/Reimb for
	Hotel, TX GOP Convention
One make the ONE Wife diagram	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
·	
Date	Payee name
07/10/2024	Republican Red Winery
Amount (\$)	Payee address; City; State; Zip Code
\$123.41	177 Webster Street #424
Expenditure from corporate funds	Monterey, CA 93940
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	GOP Wine for Pat Fallon Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to benefit ever	·

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

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 13/14 Rpt: 24/25	Texas Strong Republican Women 00080382
4 Date	5 Payee name
07/15/2024	Rettig, Chrissy
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$46.15	6111 Prairie Brush Trail
Expenditure from corporate funds	Northlake, TX 76226
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Reimbursement - Chrissy Rettig/TX GOP Conventin Reimbursement \$\$ to members
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	ShoutSocial.com
Amount (\$)	Payee address; City; State; Zip Code
\$10.00	1 E Center Street, Suite 300
Expenditure from corporate funds	Provo, UT 84606
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Messaging Service Subscription
	Wessaging Service Subscription
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	•
Date	Payee name
07/22/2024	TFRW
Amount (\$)	Payee address; City; State; Zip Code
\$25.30	PO Box 171146
- "	
Expenditure from corporate funds	Austin, TX 78717-0041
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Donation - Membership
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/OI	·

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: 14/14 Rpt: 25/25	Texas Strong Republican Women 00080382
4 Date	5 Payee name
07/10/2024	Total Wine & More
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$156.41	6400 W. Plano Pkwy
Expenditure from corporate funds	Plano, TX 75093
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Red Wine for Pat Fallon Event
	Trod Willo for Face allon 270 file
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
07/10/2024	Vess, Katherine
Amount (\$)	Payee address; City; State; Zip Code
\$46.15	10905 Murray S Johnston
Expenditure from corporate funds	Denton, TX 76207
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 Reimbursement - Katherine Vess/ "Hyatt
	Regency"/Reimb for hotel, TX GOP Convention
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
07/10/2024	Zilinsky, Peggy
Amount (\$)	Payee address; City; State; Zip Code
\$46.15	10404 Cascade Drive
Ψ40.13	10404 Cascade Drive
Expenditure from corporate funds	Denton, TX 76207
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense
LA LABITORL	Check if Austin, TX, officeholder living expense
	Reimbursement - Peggy Zilinsky/ "La Quinta Inn"/Reimb for hotel, TX GOP Convention
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	