#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00017039 3 COMMITTEE NAME **OFFICE USE ONLY** Concho Valley Republican Women's Club PAC Date Received **ELECTRONICALLY FILED** 08/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 60583 Change of Address San Angelo, TX 76906 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mrs. Teri NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Jackson CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1515 Grierson Street STREET **ADDRESS** (Residence or Business) San Angelo, TX 76901 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 1515 Grierson Street MAILING **ADDRESS** Change of Address San Angelo, TX 76901 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (325) 656-0121 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 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

			1	
2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Concho Valley Repu	blican Women's Club PA	C	00017039	9
4 COMMITTEE ACTIVITY	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2 Magguros	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	1. TOTAL UNITEMIZE	D POLITICAL CONTRIBUTIONS (OTHER THAN		
TOTALS		OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)	\$	0.00
		t qualifies for the higher itemization threshold		
	2. TOTAL POLITICA	AL CONTRIBUTIONS	\$	0.00
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)		0.00
EXPENDITURE	3. TOTAL UNITEMIZE	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		0.00
TOTALS			\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	700 100
				769.18
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		
OUTSTANDING	•	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE		
LOAN TOTALS	LAST DAY OF THE	REPORTING PERIOD	\$	0.00
6 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of pertrue and correct and includes all information under Title 15, Election Code.	erjury, that the mation require	accompanying report is ed to be reported by me
			ri Jackson	
		Signature of Ca	ımpaıgn Treas	urer
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	oed before me. by the said	,1	his the	day
		which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of off	icer administering oath

## **SUBTOTALS - MPAC**

# FORM MPAC COVER SHEET PG 3

		3 of 6	
17 COMMITTEE NAME Concho Valley Republican Women's Club PAC	<b>18</b> Filer ID 00017039	(Ethics Commission Filers)	
19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE	SUBTOTAL AMOUNT		
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$		
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBU	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	3. SCHEDULE B: PLEDGED CONTRIBUTIONS		
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FRO LABOR ORGANIZATION	\$		
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR	6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION ORGANIZATION	\$		
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION	OR LABOR ORGANIZATION	\$	
9. SCHEDULE E: LOANS		\$	
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		<b>\$</b> 769.18	
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		\$	
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONT TO FILER	RIBUTIONS RETURNED	\$	

## 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 Commit 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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
1 Total pages Schedule F1:	,				
Sch: 1/3 Rpt: 4/6	2 FILER NAME Concho Valley Republican Women's Club PAC  3 Filer ID (Ethics Commission Filers) 00017039				
4 Date	5 Payee name				
07/09/2024	Angelo Awards				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$156.02					
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	Event Expense				
	Check if Austin, TX, officeholder living expense  Naturalization Ceremony Awards				
	Naturalization Ceremony Awards				
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OI					
Data					
Date	Payee name				
07/22/2024	Constant Contact				
Amount (\$)	Payee address; City; State; Zip Code				
\$24.52	Reservoir Place				
Expenditure from	1601 Trapelo Road				
corporate funds	Waltham, MA 02451				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Loan Repayment/Reimbursement				
	Check if Austin, TX, officeholder living expense				
	Monthly Fees				
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OI					
Date	Payee name				
07/09/2024	Marti1, Linda (Mrs.)				
Amount (\$)	Payee address; City; State; Zip Code				
\$216.48	2650 Harvard Ave				
Expenditure from corporate funds	San Angelo, TX 76904				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.				
	Check if Austin, TX, officeholder living expense  Advertising investment:				
	Signs and "pop-ups"				
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held				
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

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 co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 2/3 Rpt: 5/6	Concho Valley Republican Women's Club PAC 00017039		
4	Date 07/09/2024	5 Payee name Martin, Linda (Mrs.)		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
	\$50.00	2650 Harvard Ave		
	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	Event Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense
				Speaker's Gift
_	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		<u> </u>	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ight	Office held
	Date	Payee name		
	07/05/2024	Shelburne, LaQueta (Mrs.)		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$80.00	3177 Executive Dr		
	430.00			
	Expenditure from corporate funds	San Angelo, TX 76903		
	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
				Speakers' Luncheon
	Commiste ONLY if divest	Condidate Office helder name		Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ignt	Office held
	<u>'</u>			
	Date	Payee name		
	07/11/2024	TFRW (Texas Federation of Republican Wome	en)	
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$202.40	13740 N Hwy 183		
		Suite J4		
	Expenditure from corporate funds	Austin, TX 78750-1832		
	PURPOSE	(-) -	(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule)  Fees	(5)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	1 663		Check if Austin, TX, officeholder living expense
				Membership Dues
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
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 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 (enter a category not listed above)

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/3 Rpt: 6/6	Concho Valley Republican Women's Club PAC	00017039
4 Date	5 Payee name	
07/15/2024	Vonage	
6 Amount (\$) \$39.76	7 Payee address; City; State; Zip Code 23 Main Street	
Expenditure from corporate funds	Horndel, NJ 07733	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Do	escription
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Conthly fees
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought OH	Office held