FORM GPAC GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00015647 3 COMMITTEE NAME **OFFICE USE ONLY** Northwest Forest Republican Women's Club Date Received **ELECTRONICALLY FILED** 10/01/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 15455 Canterbury Forest Dr. Date Hand-delivered or Date Postmarked APT. 314 Change of Address Tomball, TX 77377 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Gaynell NAME NICKNAME LAST **SUFFIX** Lira STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 15455 Canterbury Forest Dr. STREET **ADDRESS** APT. 314 (Residence or Business) Tomball, TX 77377 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 15455 Canterbury Forest Dr. MAILING **ADDRESS** APT. 314 Tpmball, TX 77377 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (832) 418-0267 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) X **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2024 09/26/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Northwest Forest Rep	oublican Women's Club		00015647	
14 COMMITTEE 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		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS No check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,329.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	15,003.29
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	27,019.15
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	<u> </u>		<u>'</u>	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Gayn	ell Lira	
		Signature of Car	npaign Treasur	er
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
		, tr	nis the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of office	er administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3 3 of 29

				3 of 29
L7 COMMITT	EE NAME	18 Filer ID	(Ethics Commission	on Filers)
Northwes	t Forest Republican Women's Club	00015647		
	E SUBTOTALS SCHEDULE		SUBTOTAL A	AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,329.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	?	\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$	
9. X	SCHEDULE E: LOANS		\$	0.00
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	15,003.29
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	0.00
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CO	ONTRIBUTION	IS		SCHEDULE	■ A1
	The Instru	ction Guide explains how to	o complete this for	m.	1	Total pages Schedule A1: Sch: 1/8 Rpt: 4/29	
2	FILER NAME Northwest Fo	orest Republican Women's Club			3	Filer ID (Ethics Commission 00015647	Filers)
4	Date 09/13/2024	5 Full name of contributor			7	Amount of Contribution (\$)	\$50.00
_	Dringing Loggy	Houston, TX 77070	lo.	Employer (Co. Instructions			
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions	•)		
	Date 08/12/2024	Full name of contributor Bamberg, Wanda Contributor address; City; State				Amount of Contribution (\$)	\$45.00
	Dringing aggr	Spring, TX 77379		Employer (See Instructions	_		
	Retired	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 08/16/2024	Full name of contributor Beshara, Elaine Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$25.00
		Spring, TX 77388					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 08/12/2024	Full name of contributor Bowron, Marcia Contributor address; City; State Spring, TX 77379	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$45.00
	Principal occu Business Bro	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 08/12/2024	Full name of contributor Bowron, Marcia Contributor address; City; State Spring, TX 77379	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu Business Bro	pation / Job title (See Instructions) bker		Employer (See Instructions Self	5)		
			·				

	MONET	ARY POLITICAL CONTRIBI	UTIONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 2/8 Rpt: 5/29			
2	FILER NAME Northwest Fe	orest Republican Women's Club		3 Filer ID (Ethics Commission Filers) 00015647			
4	Date 08/12/2024	 Full name of contributor out-of-state PA Bramble, Sandra Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$10.00			
		Cypress, TX 77429					
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	ons)			
	Date 08/12/2024	Full name of contributor out-of-state PA Brewer, Linda Contributor address; City; State; Zip Code	AC (ID#:)	Amount of Contribution (\$) \$45.00			
	Principal occu	Houston, TX 77070 pation / Job title (See Instructions)	Employer (See Instructions	ons)			
	Retired	salion, out the (ede mondeness)	Employer (eee mondone	5.15)			
	Date 08/12/2024	Full name of contributor out-of-state PA Brewer, Linda Contributor address; City; State; Zip Code	AC (ID#:)	Amount of Contribution (\$) \$10.00			
		Houston, TX 77070					
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	ons)			
	Date 08/12/2024	Full name of contributor out-of-state PA Carr, Judy Contributor address; City; State; Zip Code Houston, TX 77069	AC (ID#:)	Amount of Contribution (\$) \$45.00			
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	ons)			
	Date 08/12/2024	Full name of contributor out-of-state PACarver, Pam Contributor address; City; State; Zip Code Houston, TX 77069	AC (ID#:)	Amount of Contribution (\$) \$45.00			
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	ons)			
			1				

	MONET	ARY POLITICAL CONTR	S	SCHEDULE A1			
	The Instru	ction Guide explains how to compl	lete this forr	n.	1	Total pages Schedule A1: Sch: 3/8 Rpt: 6/29	
2	FILER NAME Northwest F	orest Republican Women's Club			3	Filer ID (Ethics Commission 00015647	Filers)
4	Date 08/12/2024	 Full name of contributor out-of-sta			7	Amount of Contribution (\$)	\$10.00
		Houston, TX 77069					
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 08/12/2024	Full name of contributor out-of-sta Ellsworth, Donna Contributor address; City; State; Zip Code	tte PAC (ID#:)		Amount of Contribution (\$)	\$30.00
	Principal occu	Houston, TX 77068 pation / Job title (See Instructions)		Employer (See Instructions	:) 		
	Retired	odion 7 oob tile (occ mandellons)		Employer (See manucuons	')		
	Date 08/12/2024	Full name of contributor out-of-state Ellsworth, Donna Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$10.00
		Houston, TX 77068					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 08/12/2024	Fitzgerald, Sherry (Ms.))		Amount of Contribution (\$)	\$10.00
	Principal occu Retired	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 08/12/2024	Grady, Ruth)		Amount of Contribution (\$)	\$45.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			I				

	MONET	ARY POLITICAL CONTRIBU		SCHEDULI	E A1		
	The Instru	ction Guide explains how to complete th	nis form	1.	1	Total pages Schedule A1: Sch: 4/8 Rpt: 7/29	
2	FILER NAME Northwest Fo	orest Republican Women's Club			3	Filer ID (Ethics Commission 00015647	n Filers)
4	Date 08/12/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$10.00
		Cypress, TX 77433					
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 09/13/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.00
	Principal occu	Spring, TX 77379 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 08/12/2024	Full name of contributor out-of-state PAC (Jones, June Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$45.00
	Principal occu	Spring, TX 77379 pation / Job title (See Instructions)		Employer (See Instructions)		
	Retired						
	Date 08/12/2024	Full name of contributor out-of-state PAC (Jones, June Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
		Spring, TX 77379 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 08/12/2024	Full name of contributor				Amount of Contribution (\$)	\$10.00
	Drincinal occu	Spring, TX 77389 pation / Job title (See Instructions)		Employer (See Instructions			
	Retired	oalion / Job lilie (Jee Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL (ons	SCHEDULE A1			
	The Instru	ction Guide explains hov	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/8 Rpt: 8/29	
2	FILER NAME Northwest F	orest Republican Women's C	ub		3	Filer ID (Ethics Commission 00015647	n Filers)
4	Date 09/13/2024	 Full name of contributor MacDonald, LaDonna (M Contributor address; City; S 			7	Amount of Contribution (\$)	\$37.00
		Spring, TX 77379					
8	Principal occu Housewife	pation / Job title (See Instructions	5)	9 Employer (See Instructions	s)		
	Date 08/12/2024	Full name of contributor Marcantel, Alex (Mr.) Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$30.00
	Principal occu Retired	Houston, TX 77069-1837 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> S)		
	Date 08/12/2024	Full name of contributor Marcantel, Rose (Mrs.) Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$45.00
	Principal occu	Houston, TX 77069-1837 pation / Job title (See Instructions		Employer (See Instructions	<u> </u> S)		
	Date 09/13/2024	Full name of contributor Mc Daniel, Donna Contributor address; City; S Spring, TX 77379)		Amount of Contribution (\$)	\$5.00
	Principal occu retired	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date 08/12/2024	Full name of contributor Morton, Audrey Contributor address; City; S Houston, TX 77065	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$45.00
	Principal occu Project Moni	pation / Job title (See Instructions tor	5)	Employer (See Instructions Self	5)		
			•				

	MONET	ARY POLITICAL (CONTRIBUTIO)N	IS		SCHEDULE	A1
	The Instru	ction Guide explains hov	to complete this f	orr	m.	1	Total pages Schedule A1: Sch: 6/8 Rpt: 9/29	
2	FILER NAME Northwest Fo	orest Republican Women's C	ub			3	Filer ID (Ethics Commission 00015647	Filers)
4	Date 08/12/2024	5 Full name of contributor Morton, Audrey6 Contributor address; City; S	out-of-state PAC (ID#:_			7	Amount of Contribution (\$)	\$10.00
		Houston, TX 77065		-		Ĺ		
8	Principal occu Project Moni	pation / Job title (See Instruction: tor	5)	9	Employer (See Instructions Self	5)		
	Date 08/12/2024	Full name of contributor Radcliffe, Ross (Mr.) Contributor address; City; S	out-of-state PAC (ID#:_			•	Amount of Contribution (\$)	\$20.00
	Principal occu	The Woodlands, TX 7737 pation / Job title (See Instruction:		_	Employer (See Instructions	=)		
	Educational		s)		Employer (See instructions	·)		
	Date 08/12/2024	Full name of contributor Rodgers, Shirley Contributor address; City; S)	•	Amount of Contribution (\$)	\$45.00
		Cypress, TX 77429						
	Principal occu Retired	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Date 08/12/2024	Full name of contributor Rodgers, Shirley Contributor address; City; S Cypress, TX 77429)		Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instruction:	s)		Employer (See Instructions	5)		
	Date 09/13/2024	Full name of contributor Schwind, Marti Contributor address; City; S Spring, TX 77379	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions	5)		Employer (See Instructions	s)		
				1				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/8 Rpt: 10/29	
2	FILER NAME Northwest Fo	orest Republican Women's Club		3	Filer ID (Ethics Commission 00015647	n Filers)
4	Date 08/12/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$45.00
_		Spring, TX 77379				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 08/12/2024	Full name of contributor out-of-state PAC (ID#:_ Shoaff, Kelly Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
	Principal occu	Spring, TX 77379 pation / Job title (See Instructions)	Employer (See Instructions)		
	Retired		pie) 6. (66668 document	,		
	Date 07/01/2024	Full name of contributor out-of-state PAC (ID#: TFRW Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,400.00
		Austin, TX 78750				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/13/2024	Full name of contributor out-of-state PAC (ID#:_ Vierling, Anna Contributor address; City; State; Zip Code Spring, TX 77379			Amount of Contribution (\$)	\$32.00
	Principal occu Self Employe	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/12/2024	Full name of contributor out-of-state PAC (ID#:_ Walker, Paula Contributor address; City; State; Zip Code Spring, TX 77379			Amount of Contribution (\$)	\$45.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 8/8 Rpt: 11/29
2	FILER NAME Northwest Forest Republican Women's Club	3 Filer ID (Ethics Commission Filers) 00015647
4	Date 09/13/2024 5 Full name of contributor out-of-state PAC (ID#:) Whifacke, Michele (Ms.) 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$5.00
8	The Woodlands, TX 77380 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	tions)
	Date Full name of contributor out-of-state PAC (ID#:	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Loan Officer	tions)

PLEI	DGED CONTRIBU	TIONS				SCHEDULE B
Т	he Instruction Guide ex	plains how to com	plete this form.	1	Total pages Sche Sch: 1/1 Rpt: 1	
2 FILER N	AME est Forest Republican Wome	n's Club		3	Filer ID (Et 00015647	hics Commission Filers)
4 TOTAL	OF UNITEMIZED PLED	GES			\$	0.00
5 Date	6 Full name of pledgor			_) 8	Amount of pledge (\$)	In-kind description (If applicable)
	7 Pledgor Address;	City; State; Zip C	ode			
] [Check if travel out	tside of Texas. Complete Schedule T.
10 Principal	occupation / Job title (See Instru	uctions)	11 Employer (See In	structi	ons)	

	LOANS					S	CHEDULE E
	The Instructio	on Guide explains how to co	mplete this f	orm.		tal pages Schedu ch: 1/1 Rpt: 13/2	
2	FILER NAME Northwest Fores	st Republican Women's Club				er ID (Ethics Co 0015647	mmission Filers)
4	TOTAL OF UN	IITEMIZED LOANS				\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan A	mount (\$)
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interest	
						11 Maturity	y Date
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See In	structions)		
14	Description of Coll	ateral		15 Check if personal	funds were dep		al account structions)
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amoun	t Guaranteed (\$)
	not applicable	18 Guarantor address; City;	State;	Zip Code			
20	Principal occupation	on		21 Employer (See In	structions)		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	d 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: 1/16 Rpt: 14/29	Northwest Forest Republican Women's Club 00015647	
4 Date	5 Payee name	
07/09/2024	Adams, AAron	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$200.00	2620 Tanglewilde	
	#1029	
Expenditure from corporate funds	Houston, TX 77063	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF EXPENDITURE	Contributions/Donations Made By	
-	Candidate/Officeholder/Political Committee Contribution to Aaron Adam Campaign	
	Contribution to Aaron Adam Campaign	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
Date	Payee name	=
07/09/2024	Archer, Will	
Amount (\$)	Payee address; City; State; Zip Code	
\$200.00	440 Louisiana	
	Suite 1550	
Expenditure from corporate funds	Houston, TX 77002	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	
	Candidate/Officeholder/Political Committee Contribution to Will Archer Campaign	
	Contribution to Will Archer Campaign	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	1	
Date	Payee name	_
07/09/2024	Aston, Sonya	
Amount (\$)	Payee address; City; State; Zip Code	
\$200.00	9434 Katy Frwy	
	Suite 310	
Expenditure from corporate funds	Houston, TX 77055	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF EXPENDITURE	Contributions/Donations Made By	
EXI ENDITORE	Candidate/Officeholder/Political Committee	
	Contribution to Sonya Aston Campaign	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/16 Rpt: 15/29	Northwest Forest Republican Women's Club 00015647
4 Date	5 Payee name
07/09/2024	Bain, Bruce
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$200.00	10810 Katy Freeway
Expenditure from	Suite 102
corporate funds	Houston, TX 77043
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Contribution to Brace Bain Campaign
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/09/2024	Bettencourt, Paul (Sen.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1 E Greenway Plaza
	Ste 225
Expenditure from corporate funds	Houston, TX 77046
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Contribution if Century Facilities and Betterlocal Campaign
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/09/2024	Black, Ray
Amount (\$)	Payee address; City; State; Zip Code
\$200.00	4301 Yoakum Blvd
Expenditure from corporate funds	Houston, TX 77006
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Contribution to Ray Black Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure 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

	Candidate/Officeholder/Politica Credit Card Payment		nmittee Legal Services Salarie The Instruction Guide explains how to	s/Wag	ages/Contract Labor OTHER (enter a category not listed above)
_	Tatal as a confidence of the Education	_		411100	· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 3/16 Rpt: 16/29		Northwest Forest Republican Women's Club		00015647
4	Date	5	Payee name		
	07/09/2024		Burndette, Aaron		
6	Amount (\$)	7	Payee address; City; State; Zip	Code	le
	\$200.00		P O Box 590689		
	Ψ200.00		1 0 200 000000		
Н	Expenditure from				
Ь	corporate funds		Houston, TX 77259		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b	(b) Description
	OF EXPENDITURE		Contributions/Donations Made By		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE		Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense
					Contribution to Aaron Burdette Campaign
9	Complete ONLY if direct		Candidate/Officeholder name Office s	ough	ht Office held
	expenditure to benefit C/O	Н			
	Date	Г	Payee name		
	07/09/2024		Copeland, Nile (Judge)		
		_			
	Amount (\$)		Payee address; City; State; Zip	Code	e
	\$200.00		5718 Westheimer Rd		
_	Typonditure from		Ste 1000		
	Expenditure from corporate funds		Houston, TX 77057		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b	(b) Description
	OF	``	Contributions/Donations Made By	`	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense
					Contribution to Nile Copeland Campaign
	Complete ONLY if direct		Candidate/Officeholder name Office s	ough	ht Office held
	expenditure to benefit C/O	Н		J	
	D :				
	Date		Payee name		
	07/09/2024		DeAngelo, Lori		
	Amount (\$)		Payee address; City; State; Zip	Code	le
	\$200.00		2607 Randal Lake Lane		
	Expenditure from corporate funds		Spring, TX 77388		
		(-)		1/1-	The second secon
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	a)	(b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense
			Candidate/Onicendide//Fullical Committee		Contribution to Lori DeAngelo Campaign
					an paragraphic desired and a second desired and a s
	Complete ONLY if direct	Ļ	Condidate/Officeholder name	01157-	D# Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name Office s	ougn	ht Office held
	- parametric 30 2000000 0/01	•			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 4/16 Rpt: 17/29	Northwest Forest Republican Women's Club 00015647
4 Date	5 Payee name
07/09/2024	Detoto, Emily
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$200.00	917 Franklin
	4th Floor
Expenditure from corporate funds	Houston, TX 77002
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Continuodions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Contribution to Emily Detoto Campaign
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/01	'
Date	Payee name
08/16/2024	Donelson CPA, Karen (Mrs.)
Amount (\$)	Payee address; City; State; Zip Code
\$270.00	9414 New Forest Dr
Expenditure from corporate funds	Spring, TX 77379
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Filing for 2023 Federal Tax Return
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	-1
Date	Payee name
07/17/2024	Fitzpatrick, Marcia
Amount (\$)	Payee address; City; State; Zip Code
\$140.00	6815 Stoney River Drive
_	
Expenditure from corporate funds	Spring, TX 77379
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 TFRW Reimbursement from RPT Convention
	TEIXW Reinbursement nom RE i Convention
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal manua Cabadula E4.	
1 Total pages Schedule F1: Sch: 5/16 Rpt: 18/29	2 FILER NAME Northwest Forest Republican Women's Club 3 Filer ID (Ethics Commission Filers) 00015647
4 Date	5 Payee name
07/09/2024	Garcia, Linda (Judge)
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code2310 E. Shannon St
, , , , , ,	
Expenditure from corporate funds	Deer Park, TX 77536
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Contribution to Linda Garcia Campaign
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Davisa nama
07/17/2024	Payee name
	Gibson, Tracine
Amount (\$)	Payee address; City; State; Zip Code
\$140.00	9618 Oxted Lane
Expenditure from corporate funds	Spring, TX 77379
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
	TFRW Reimbursement from Convention
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/09/2024	Goodwin, Lincoln (Judge)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	19810 Wild Poppy Drive
Expenditure from corporate funds	Spring, TX 77379
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LAI LINDITORE	Candidate/Officeholder/Political Committee
	Contrbution to Judge Lincoln Goodwin Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialities to beliefft G/OI	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/16 Rpt: 19/29	Northwest Forest Republican Women's Club 00015647
4 Date	5 Payee name
07/08/2024	Harless, Sam
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	1 Stonegate Park Court
Expenditure from corporate funds	Spring, TX 77379
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution to Sam Harless Campaign
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitie to belieff C/OI	'
Date	Payee name
07/09/2024	Herman, Mark (Officer)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	2407 sweetgum hill court
Expenditure from corporate funds	spring, TX 77388
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Contribution to Mark Herman Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
07/17/2024	Keith, Merry
Amount (\$)	Payee address; City; State; Zip Code
\$140.00	16519 Courtland Circle
Evpanditura from	
Expenditure from corporate funds	Spring, TX 77379
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 TFRW Reimbursement from Convention
	TERVV Reinibulsement nom Convention
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Total manua Cabadula F1.	
1 Total pages Schedule F1: Sch: 7/16 Rpt: 20/29	2 FILER NAME Northwest Forest Republican Women's Club 3 Filer ID (Ethics Commission Filers) 00015647
4 Date	5 Payee name
07/17/2024	Kitchens, Shirley
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$140.00	8627 Hufsmith Rd
	APT 1511
Expenditure from	Tomball, TX 77375
corporate funds	Tottipali, 1× 77373
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
	TFRW Reimbursement from Convention
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/09/2024	Know, Mike
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	94 Katy Frwy
+ =,000.00	#108
Expenditure from	
corporate funds	Houston, TX 77024
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
	Contribution to Mike Knox Campaign
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/09/2024	Landrum, Michael (Judge)
Amount (\$)	Payee address; City; State; Zip Code
\$200.00	P O Box 19422
Even a ditura fra ::	
Expenditure from corporate funds	Houston, TX 77224-9422
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Candidate/Officeholder/Political Committee
	Contribution to Michael Landrum Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm 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 (order a cottogen pat listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/16 Rpt: 21/29	Northwest Forest Republican Women's Club 00015647
4 Date	5 Payee name
07/09/2024	Lemkuil, Daniel
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 306 Main St
,	3rd Floor
Expenditure from	
corporate funds	Houston, TX 77002
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Contribution to Danier Lemkuii Campaign
O Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/09/2024	Lothringer, Lauren
Amount (\$)	Payee address; City; State; Zip Code
\$448.00	14700 Vintage Preserve Pkwy
	18303
Expenditure from corporate funds	Houston, TX 77070
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Postage Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Stamps for mail out of post cards
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/17/2024	McKay, Chelia
Amount (\$)	Payee address; City; State; Zip Code
\$140.00	7833 Augusta Pines Dr
,	#4412
Expenditure from	
corporate funds	Spring, TX 77389
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 TFRW Reimbursement from Convention
	TERVV Reithbulsement hom Convention
Complete CNII V if divert	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 9/16 Rpt: 22/29	Northwest Forest Republican Women's Club 00015647	
4 Date	5 Payee name	
07/09/2024	Milliron, Nathan	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$200.00	P O Box 88074	
Expenditure from	Haveter TV 77000 0074	
corporate funds	Houston, TX 77288-0074	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Contributions/Donations Made By	
	Candidate/Officeholder/Political Committee Cantribution to Nothern Milliron Compaign	
	Contribution to Nathan Milliron Campaign	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experiditure to beliefit C/Oi		
Date	Payee name	
08/02/2024	Momentum Printing and Graphics	
Amount (\$)	Payee address; City; State; Zip Code	_
\$10.73	15018 Mintz	
Ψ10.110	10010 1/11/12	
Expenditure from		
corporate funds	Houston, TX 77014	
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.	
EXI ENDITORE	Check if Austin, TX, officeholder living expense	
	Newsletter	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/Oi	7	
Date	Payee name	=
08/13/2024	Momentum Printing and Graphics	
Amount (\$)	Payee address; City; State; Zip Code	_
\$176.72		
\$170.72	15018 Mintz	
Expenditure from		
corporate funds	Houston, TX 77014	
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.	
LAFENDITORE	Check if Austin, TX, officeholder living expense	
	Printing of Addendum	
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 Committee

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

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

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME Sch: 10/16 Rpt: 23/29 Northwest Forest Republican Women's Club 00015647 4 Date 09/13/2024 5 Payee name Momentum Printing and Graphics 6 Amount (\$) 7 Payee address; City; State; Zip Code 15018 Mintz Expenditure from corporate funds OF Printing Expense (a) Category (see Categories listed at the top of this schedule) Printing Confect if I ravel outside of Texas. Complete Schedule T. Candidate/Officeholder name Office sought Office held Date 09/13/2024 Payee name Momentum Printing and Graphics Amount (\$) Payee address; City; State; Zip Code 15018 Mintz Purpose OF Expenditure from corporate funds Purpose OF Expenditure for this schedule) Printing Expense (a) Categories listed at the top of this schedule) Office Sought Office held (b) Description Conce if Aussin, TX, officeholder living expense Membership Forms Complete QNLY if direct expenditure to benefit C/OH Conceil Aussin, TX, officeholder living expense Membership Forms	
Sch: 10/16 Rpt: 23/29 Northwest Forest Republican Women's Club 00015647 4	
4 Date 09/13/2024 5 Payee name Momentum Printing and Graphics 6 Amount (\$) \$24.26 15018 Mintz Expenditure from corporate funds Payee name Printing Expense Payee name Printing Expense Payee name Printing Expense Payee name Momentum Printing and Graphics Payee name Payee name Momentum Printing and Graphics Payee name Payee name Payee name Momentum Printing and Graphics Payee name Payee name Momentum Printing and Graphics Payee name Payee name Payee name Momentum Printing and Graphics Payee name Payee name Momentum Printing and Graphics Payee name Payee name Momentum Printing name Payee name Payee name Payee name Momentum Printing name Payee name Payee name Payee name Momentum Printing name Payee name Payee name Momentum Printing name Payee name Payee name Payee name Payee name Momentum Printing name Payee name	
O9/13/2024 Momentum Printing and Graphics	
\$ Amount (\$) \$24.26 The Payee address; City; State; Zip Code Expenditure from corporate funds Houston, TX 77014 B PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Check if Tavel outside of Texas. Complete Schedule T.	
\$24.26 15018 Mintz	
Expenditure from corporate funds	
B PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if Austin, TX, officeholder living expense Newsletter 9 Complete ONLY if direct expenditure to benefit C/OH Date O9/13/2024 Amount (\$) Payee aaddress; City; State; Zip Code S39.51 Expenditure from corporate funds PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if Austin, TX, officeholder living expense Newsletter Office sought Office held Office held Office sought Office held Office held Office held Office held Office held Office held	
B PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if Austin, TX, officeholder living expense Newsletter 9 Complete ONLY if direct expenditure to benefit C/OH Date O9/13/2024 Amount (\$) Payee aaddress; City; State; Zip Code S39.51 Expenditure from corporate funds PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if Austin, TX, officeholder living expense Newsletter Office sought Office held Office held Office sought Office held Office held Office held Office held Office held Office held	
Printing Expense Office sought Office held Office held Office held Payee name Momentum Printing and Graphics Amount (\$) Payee address; City; State; Zip Code \$39.51 Expenditure from corporate funds Houston, TX 77014 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense Office held (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Forms Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Printing Expense Printing Expense Check if travel outside of Texas. Complete Schedule T.	
9 Complete ONLY if direct expenditure to benefit C/OH Date O9/13/2024 Payee name Momentum Printing and Graphics Amount (\$) Payee address; City; State; Zip Code \$39.51 15018 Mintz Expenditure from corporate funds Houston, TX 77014 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense Membership Forms (b) Description Check if availouside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Forms Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
9 Complete ONLY if direct expenditure to benefit C/OH Date	
Date 09/13/2024 Payee name Momentum Printing and Graphics Amount (\$) Payee address; City; State; Zip Code \$39.51 Payee address; City; State; Zip Code \$39.51 Porporate funds Houston, TX 77014 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Forms Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/13/2024 Payee name Momentum Printing and Graphics Amount (\$) Payee address; City; State; Zip Code \$39.51 Payee address; City; State; Zip Code \$39.51 Porporate funds Houston, TX 77014 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Forms Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/13/2024 Momentum Printing and Graphics Amount (\$) Payee address; City; State; Zip Code \$39.51 Expenditure from corporate funds Houston, TX 77014 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Forms Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Momentum Printing and Graphics Amount (\$)	
Amount (\$) Payee address; City; State; Zip Code \$39.51	
\$39.51 15018 Mintz Expenditure from corporate funds Houston, TX 77014 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense Check if travel outside of Texas. Complete Schedule T. Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Candidate/Officeholder name Office sought Office held Candidate/Officeholder name Office sought Officeholder name Candidate/Officeholder name Officehold	
Expenditure from corporate funds PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Forms Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Forms Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Forms Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Printing Expense Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Forms Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Forms Complete ONLY if direct expenditure to benefit C/OH Check if Austin, TX, officeholder living expense Membership Forms Office sought Office held Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Forms Check if Austin, TX, officeholder living expense Membership Forms Check if Austin, TX, officeholder living expense Membership Forms Check if Austin, TX, officeholder living expense Membership Forms Check if Austin, TX, officeholder living expense Membership Forms Check if Austin, TX, officeholder living expense Membership Forms Check if Austin, TX, officeholder living expense Membership Forms Check if Austin, TX, officeholder living expense Check if Indian In	
Complete ONLY if direct expenditure to benefit C/OH Check if Austin, 1X, officenoider living expense Membership Forms Office sought Office held	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
expenditure to benefit C/OH	
expenditure to benefit C/OH	
Data Bayes same	
Date Payee name	
07/09/2024 Oliverson, Tom	
Amount (\$) Payee address; City; State; Zip Code	
\$250.00 2 Greenway Plaza	
#225	
Expenditure from corporate funds Houston, TX 77046	
PURPOSE OF (a) Category (See Categories listed at the top of this schedule) OF Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Contribution to Tom Oliverson Campaign	
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	1

SCHEDULE F1

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

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 11/16 Rpt: 24/29	Northwest Forest Republican Women's Club 00015647
4 Date	5 Payee name
07/09/2024	Oncken, Michele
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$200.00	1328 Du Barry Ln
Expenditure from corporate funds	Houston, TX 77018
8 PURPOSE	1
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution to Michele Oncken Campaign
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/09/2024	Peneguy, Matthew
Amount (\$)	Payee address; City; State; Zip Code
\$200.00	P O Box 6881
Expenditure from	
corporate funds	Houston, TX 77265
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Contribution to Matthew Peneguy Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
07/17/2024	Radcliffe, Nancy
Amount (\$)	Payee address; City; State; Zip Code
\$140.00	23 Sunset Crest Trail
Expenditure from corporate funds	The Woodlands, TX 77375
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.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	TFRW Reimbursement from RPT Convention
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 12/16 Rpt: 25/29	2 FILER NAME Northwest Forest Republican Women's Club 3 Filer ID (Ethics Commission Filers) 00015647
4 Date	5. Dougo nama
	5 Payee name
07/09/2024	Ramsey, Tom
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 55385
, ,,,,,,,,,,	
Expenditure from	
corporate funds	Houston, TX 77255
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution to Tom Ramsey Campaign
	Sommistion to Form Number of Sumpary
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Data	
Date	Payee name
07/17/2024	Rubli, Donna
Amount (\$)	Payee address; City; State; Zip Code
\$140.00	9919 Eden Valley Dr
Ψ140.00	3313 Edeli Valley Di
Expenditure from	
corporate funds	Spring, TX 77379
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
	TFRW Reimbursement Convention
	TPRW Reinbursement Convention
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
07/09/2024	Shuchart, Ksthryn
Amount (\$)	Payee address; City; State; Zip Code
\$200.00	7932 N. Wellington Court
Ψ200.00	1002 N. Wollington Court
Expenditure from	
corporate funds	Houston, TX 77055
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Check if Austin, TX, officeholder living expense
	Contribution to Kathryn Shuchart Campaign
	Continuation to Nating it Shachart Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
I	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment						
Credit Card F dyment	The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 13/16 Rpt: 26/29	Northwest Forest Republican Women's Club 00015647					
4 Date	5 Payee name	Т				
07/09/2024	Simons, Dan					
	· · · · · · · · · · · · · · · · · · ·	_				
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$750.00	P O Box 62463					
Expenditure from						
corporate funds	Houston, TX 77205					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_				
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By					
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense					
	Contribution to Dan Simons Campaign					
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-				
expenditure to benefit C/OI						
		=				
Date	Payee name					
07/17/2024	Slaydon-Huston, Kathleen					
Amount (\$)	Payee address; City; State; Zip Code					
\$140.00	6614 Stoney River Dr					
Expenditure from	 Spring, TX 77379					
corporate funds		_				
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 TFRW Reimbursement from Convention					
	TFRW Reimbursement from Convention					
		_				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
experiditure to beliefit C/Oi						
Date	Payee name					
07/09/2024	Staley, Brian					
Amount (\$)	Payee address; City; State; Zip Code	-				
\$200.00	4529 Hummingbird St					
Ψ200.00	4529 Huminingbird St					
Expenditure from						
corporate funds	Houston, TX 77035					
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					
	Contribution to Brian Staley Campaign					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OH						
		┪				

SCHEDULE F1

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services	Salaries/W	/ages/Contract Labor	OTHER (enter a	category not listed above)
		uide explains how to co	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAME			3 Filer ID	(Ethics Commission Filers)
Sch: 14/16 Rpt: 27/29	Northwest Forest Republican Women's Club 00015647				
4 Date	5 Payee name				
07/09/2024	Swanson, Valoree (Rep.)				
6 Amount (\$)	7 Payee address; City;	State; Zip Co	de		
\$1,000.00	6046 FM 2920 #619				
Expenditure from corporate funds	Spring, TX 77379				
8 PURPOSE			(b) December		
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made Ry Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Contributions/Donations M Candidate/Officeholder/Po			, TX, officeholder living	
	Carialaate/Ciliceriolaei/i C	intical Committee	ш		Swanson Campaign
				•	, -
9 Complete ONLY if direct	Candidate/Officeholder name	Office sou	ght	Office he	eld
expenditure to benefit C/OI					
Date	Payee name				
07/17/2024	TFRW				
Amount (\$)	Payee address; City;	State; Zip Co	de		
\$25.00	13740 N Hwy 183				
	suite J4				
Expenditure from corporate funds	Austin, TX 78750				
•		T	(I-X =		
PURPOSE OF	(a) Category (See Categories listed at	the top of this schedule)	(b) Description	outside of Texas. Com	nlete Schedule T
EXPENDITURE	Event Expense		=	, TX, officeholder living	
			RPT Convent		
Complete ONLY if direct	Candidate/Officeholder name	Office sou	ght	Office he	eld
expenditure to benefit C/OI			_		
Date	Payee name				
08/16/2024	TFRW				
		Otata: 7in Oa	d -		
Amount (\$)	Payee address; City;	State; Zip Co	ae		
\$303.60	13740 N Hwy 183				
Expenditure from	suite J4				
corporate funds	Austin, TX 78750				
PURPOSE	(a) Category (See Categories listed at	the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees		<u> </u>	outside of Texas. Com	
EXI ENDITORE				, TX, officeholder living	gexpense
			Membership	rees	
Commission ONUVIVIII	Consider Office L. L.	0"	la #	O.C	al al
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	ynt	Office he	eiu

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	Il Committee Legal Services Salaries A The Instruction Guide explains how to co	Wages/Contract Labor OTHER (enter a category not listed above) pmplete this form.				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 15/16 Rpt: 28/29	Northwest Forest Republican Women's Club	00015647				
4 Date	5 Payee name					
09/07/2024	The Dictionary Project					
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode				
\$360.00	P O Box 1845					
Expenditure from corporate funds	Charleston, SC 29402					
8 PURPOSE		(h) Description				
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense				
		Dictionery Project				
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office soul	ught Office held				
Date	Payee name					
08/26/2024	Thistle Draftshop					
Amount (\$)	Payee address; City; State; Zip Co	ode				
\$493.77	5210 FM 2920					
	Suite 100					
Expenditure from corporate funds	Spring, TX 77379					
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 Membership				
		Membership				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	I ught Office held				
Date	Payee name					
07/23/2024	X-cel Badge and Engraving					
Amount (\$)	Payee address; City; State; Zip Co	ode				
\$20.90	13740 N Hwy 183					
	suite J4					
Expenditure from corporate funds	Austin, TX 78750					
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 Badges				
		Dauges				
Complete ONLY if direct	Candidate/Officeholder name Office sou	lught Office held				
expenditure to benefit C/OI		5				

SCHEDULE F1

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

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·					
1 Total pages Schedule F1: Sch: 16/16 Rpt: 29/29	2 FILER NAME Northwest Forest Republican Women's Club 3 Filer ID (Ethics Commission Filers) 00015647					
4 Date	5 Payee name					
08/13/2024	X-cel Badge and Engraving					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$59.90	13740 N Hwy 183					
Expenditure from	suite J4					
corporate funds	Austin, TX 78750					
8 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.					
EXPENDITORE	Check if Austin, TX, officeholder living expense					
	Badges					
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OI	1					
Date	Payee name					
09/13/2024	X-cel Badge and Engraving					
Amount (\$)	Payee address; City; State; Zip Code					
\$110.90	13740 N Hwy 183					
7220.00	suite J4					
Expenditure from						
corporate funds	Austin, TX 78750					
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.					
	Check if Austin, TX, officeholder living expense Badges					
	Dauges					
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/O	o					
Date	Payee name					
07/17/2024	Young, Barbara					
Amount (\$)	Payee address; City; State; Zip Code					
\$140.00	8834 Leaning Hollow Ln					
Expenditure from corporate funds	Spring, TX 77379					
PURPOSE						
OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE	Check if Austin, TX, officeholder living expense					
	TRW Reimbursement from Convention					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/O	1					