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) 00085167 3 COMMITTEE NAME **OFFICE USE ONLY** Leander Area Republican Women Date Received **ELECTRONICALLY FILED** 10/04/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 551 Date Hand-delivered or Date Postmarked Change of Address Leander, TX 78641 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Diane K. NAME NICKNAME LAST **SUFFIX** Herrera STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2204 Traditions Court STREET **ADDRESS** (Residence or Business) Leander, TX 78641 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2204 Traditions Court MAILING **ADDRESS** Leander, TX 78641 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (610) 585-7665 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) |
|---|--|--|-----------------|----------------------------|
| Leander Area Republic | an Women | | 00085167 | |
| 14 COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Republican | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | |
| | Measures (Describe by date and location of election and nature of issue.) | A. Supported | | |
| | | B. Opposed | | |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | |
| 15 CONTRIBUTION TOTALS | PLEDGES, LOANS, CONTRIBUTIONS M check here if this report | D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold | \$ | 0.00 |
| | 2. TOTAL POLITICA (OTHER THAN PLE | L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 17,405.55 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED | POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICA | L EXPENDITURES | \$ | 11,872.30 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL OF THE REPORTIN | CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD | DAY \$ | 22,965.32 |
| OUTSTANDING LOAN TOTALS | • | AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD | THE \$ | 0.00 |
| 16 AFFIDAVIT | • | | ' | |
| | | I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code. | | |
| | | Mrs. Diane | e K. Herrera | |
| | | Signature of Ca | mpaign Treasure | er |
| AFFIX NOTAR) | / STAMP / SEAL ABOVE | | | |
| Sworn to and subscribed | d before me, by the said | , ti | his the | day |
| | | which, witness my hand and seal of office. | | |
| | | | | |
| Signature of officer ac | dministering oath | Printed name of officer administering oath | Title of office | er administering oath |

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

| | | | | | 3 of 66 |
|---------------|----------------------|--|--------------|---------|--------------------|
| 17 CON | MMITTE | E NAME | 18 Filer ID | (Ethics | Commission Filers) |
| Lea | nder A | rea Republican Women | 00085167 | | |
| | | E SUBTOTALS SCHEDULE | | SI | UBTOTAL AMOUNT |
| 1. | Х | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ | 16,941.78 |
| 2. | X | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | 463.77 |
| 3. | | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ | |
| 4. | | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION | R | \$ | |
| 5. | | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION | ATION OR | \$ | |
| 6. | | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG | ANIZATION | \$ | |
| 7. | | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | | \$ | |
| 8. | | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (| ORGANIZATION | \$ | |
| 9. | 9. SCHEDULE E: LOANS | | | | |
| 10. | Х | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | 6 | \$ | 11,872.30 |
| 11. | | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | |
| 12. | | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | ONS | \$ | |
| 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 | \$ | |
| | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|---------------------------|--|------------------------------|----|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 1/45 Rpt: 4/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 09/26/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$210.00 |
| _ | | Leander, TX 78641 | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | i) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#:_Avery, Mary Jane Contributor address; City; State; Zip Code Marble Falls, TX 78654 | | | Amount of Contribution (\$) | \$26.25 |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$12.00 |
| | | Austin, TX 78701 | 5 1 (0 1 1 1 | | | |
| | Strategic Pol | pation / Job title (See Instructions) icy Analyst | Employer (See Instructions | 5) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#:_Birk, Carla Contributor address; City; State; Zip Code Round Rock, TX 78681 | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 09/19/2024 | Full name of contributor out-of-state PAC (ID#:_Birk, Carla Contributor address; City; State; Zip Code Round Rock, TX 78681 | | | Amount of Contribution (\$) | \$210.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | () | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTI | ONS | | SCHEDUL | E A1 |
|---|---------------------------------|---|--|----------------|---|-------------|
| | The Instruc | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 2/45 Rpt: 5/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 07/05/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$130.25 |
| _ | | Georgetown, TX 78628 | 1 | L | | |
| 8 | Principal occu Realtor | oation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID# Bishop, Kalynn Contributor address; City; State; Zip Code | <u>:</u>) | | Amount of Contribution (\$) | \$210.00 |
| | Dringing agg | Georgetown, TX 78628 | Employer (See Instructions | <u></u> | | |
| | Realtor | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID#Bishop, Kalynn Contributor address; City; State; Zip Code | t:) | | Amount of Contribution (\$) | \$10.50 |
| | | Georgetown, TX 78628 | | | | |
| | Principal occu Realtor | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID# Bishop, Kalynn Contributor address; City; State; Zip Code Georgetown, TX 78628 | <u>; </u> | • | Amount of Contribution (\$) | \$10.50 |
| | Principal occu Realtor | pation / Job title (See Instructions) | Employer (See Instructions | <u>I</u> S) | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID#Black, Donna Contributor address; City; State; Zip Code Cedar Park, TX 78613 | <u>; </u> | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu payroll admir | pation / Job title (See Instructions) histrator | Employer (See Instructions | 5) | | |
| | - | | 1 | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDULE | ■ A1 |
|---|---------------------------|---|---------------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 3/45 Rpt: 6/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | Filers) |
| 4 | Date 08/16/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$21.00 |
| _ | | Leander, TX 78641 | | | | |
| 8 | retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$21.00 |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | retired | , | , , , , , , , , , , , , , , , , , , , | , | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$78.75 |
| | | Leander, TX 78641 | | | | |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$26.25 |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$26.25 |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUT | IONS | | SCHEDUL | E A1 |
|---|-----------------------------|--|------------------------------|----------|---|-------------|
| | The Instruc | ction Guide explains how to complete this | s form. | 1 | Total pages Schedule A1: Sch: 4/45 Rpt: 7/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 08/29/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$100.00 |
| _ | | Leander, TX 78641 | To 5 1 (0 1 ; ii | Ĺ | | |
| 8 | HR Consulta | pation / Job title (See Instructions) nt | 9 Employer (See Instructions | S) | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID Bonardi, Kathleen Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$26.25 |
| | Deinstead | Leander, TX 78641 | Faralassa (Cara Instructions | <u> </u> | | |
| | retired | pation / Job title (See Instructions) | Employer (See Instructions | S) | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID Bonardi, Kathleen Contributor address; City; State; Zip Code | #:) | | Amount of Contribution (\$) | \$141.75 |
| | | Leander, TX 78641 | | | | |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID Bonardi, Kathleen Contributor address; City; State; Zip Code Leander, TX 78641 |) | | Amount of Contribution (\$) | \$26.25 |
| | Principal occu retired | oation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date 09/24/2024 | Full name of contributor out-of-state PAC (ID Boyle, Patti Contributor address; City; State; Zip Code Round Rock, TX 78664 | #:) | | Amount of Contribution (\$) | \$12.00 |
| | Principal occu Managemen | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Managemen | Consumant | | | | |

| | MONET | ARY POLITICAL CON | ITRIBUTION | IS | | SCHEDULE | ■ A1 |
|---|---------------------------------|--|--------------------------------|----------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to co | omplete this for | m. | 1 | Total pages Schedule A1: Sch: 5/45 Rpt: 8/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | | 3 | Filer ID (Ethics Commission 00085167 | Filers) |
| 4 | Date 08/27/2024 | Full name of contributor ou Brown, DonnaContributor address; City; State; Zip | | | 7 | Amount of Contribution (\$) | \$42.00 |
| _ | <u> </u> | Leander, TX 78641 | | 5 1 (2 1 1 1 | | | |
| 8 | Retired Teac | pation / Job title (See Instructions) her | 9 | Employer (See Instructions |) | | |
| | Date 08/27/2024 | Full name of contributor ou Brown, Donna Contributor address; City; State; Zi | t-of-state PAC (ID#: p Code | | | Amount of Contribution (\$) | \$17.00 |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Retired Teac | | | Employer (See Institutions | , | | |
| | Date 07/19/2024 | Full name of contributor ou Brown, Janet Contributor address; City; State; Zip | t-of-state PAC (ID#: p Code |) | | Amount of Contribution (\$) | \$21.00 |
| | | Belton, TX 76513 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 08/16/2024 | Full name of contributor ou ou Buchanan, Sherilyn Contributor address; City; State; Zip Leander, TX 78641 | | | | Amount of Contribution (\$) | \$10.50 |
| | Principal occu retired teach | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 09/26/2024 | Full name of contributor ou Burkman, Brandi Contributor address; City; State; Zij Leander, TX 78641 | t-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$10.00 |
| | | pation / Job title (See Instructions) letwork Management | | Employer (See Instructions |) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULE | ■ A1 |
|---|---------------------------|---|------------------------------|----------|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 6/45 Rpt: 9/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | Filers) |
| 4 | Date 09/26/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$25.00 |
| _ | | Leander, TX 78641 | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | i) | | |
| | Date 08/01/2024 | Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$52.50 |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | VP Resource | e Development | | | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#:_ Cantrell, Lesa Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$52.50 |
| | | Leander, TX 78641 | | | | |
| | • | pation / Job title (See Instructions) e Development | Employer (See Instructions | () | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_ Cantrell, Lesa Contributor address; City; State; Zip Code Leander, TX 78641 |) | | Amount of Contribution (\$) | \$10.50 |
| | • | pation / Job title (See Instructions) e Development | Employer (See Instructions | 5) | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID#:_ Carper, Sharon Contributor address; City; State; Zip Code Cedar Park, TX 78641 |) | | Amount of Contribution (\$) | \$27.00 |
| | Principal occu nurse | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUT | IONS | | SCHEDUL | E A1 |
|---|----------------------------|---|------------------------------|----|--|-------------|
| | The Instruc | ction Guide explains how to complete this | s form. | 1 | Total pages Schedule A1: Sch: 7/45 Rpt: 10/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 09/26/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$25.00 |
| _ | | Cedar Park, TX 78641 | | | | |
| 8 | Principal occu nurse | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Date 09/24/2024 | Full name of contributor out-of-state PAC (ID Carper, Sharon Contributor address; City; State; Zip Code | #:) | | Amount of Contribution (\$) | \$17.00 |
| | Dringinal occu | Cedar Park, TX 78641 pation / Job title (See Instructions) | Employer (See Instructions | e) | | |
| | nurse | oalion7 Job title (See instructions) | Employer (See Instructions | 5) | | |
| | Date 08/16/2024 | Full name of contributor | #:) | | Amount of Contribution (\$) | \$10.50 |
| | | Leander, TX 78641 | | | | |
| | Principal occu attorney | oation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID Chaudhari, Rupal Contributor address; City; State; Zip Code Leander, TX 78641 | #:) | | Amount of Contribution (\$) | \$10.50 |
| | Principal occu attorney | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID Chaudhari, Rupal Contributor address; City; State; Zip Code Leander, TX 78641 | #) | | Amount of Contribution (\$) | \$525.00 |
| | Principal occu attorney | oation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | | | • | | | |

| | MONET | ARY POLITICAL CONTRIBUTI | ONS | | SCHEDULI | E A1 |
|---|-------------------------------|---|------------------------------|----------------|--|-------------|
| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 8/45 Rpt: 11/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 08/01/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$42.00 |
| _ | 5 | Cedar Park, TX 78613 | 10 5 1 (0 1 1 1 | <u> </u> | | |
| 8 | Principal occu Project Man | pation / Job title (See Instructions) ager | 9 Employer (See Instructions | S) | | |
| | Date 08/29/2024 | Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$10.50 |
| | Principal occu Retired | Austin, TX 78732 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> S) | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID# Corona, Kimberly Contributor address; City; State; Zip Code | : | | Amount of Contribution (\$) | \$57.75 |
| | Principal occu | Austin, TX 78734 pation / Job title (See Instructions) | Employer (See Instructions | - s) | | |
| | Self Employe | ed/Sales Director | | | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (ID# Cosley, Irene Contributor address; City; State; Zip Code Leander, TX 78641 | :) | | Amount of Contribution (\$) | \$21.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> S) | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID# Cosley, Irene Contributor address; City; State; Zip Code Leander, TX 78641 | :) | | Amount of Contribution (\$) | \$26.25 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|---------------------------|--|------------------------------|----|--|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 9/45 Rpt: 12/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 09/26/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$10.50 |
| _ | | Leander, TX 78641 | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#:_ Crowley, Stacy Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | Cedar Park, TX 78613 pation / Job title (See Instructions) | Employer (See Instructions | | | |
| | - | nager/Owner | Employer (See instructions | ') | | |
| | Date 09/12/2024 | Full name of contributor |) | | Amount of Contribution (\$) | \$157.50 |
| | | Leander, TX 78641 | | | | |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions | i) | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID#:_ Davis, Laura Contributor address; City; State; Zip Code Leander, TX 78641 | | | Amount of Contribution (\$) | \$26.25 |
| | • | pation / Job title (See Instructions) mom/sales and marketing | Employer (See Instructions |) | | |
| | Date 08/08/2024 | Full name of contributor out-of-state PAC (ID#:_ Davis, Laura Contributor address; City; State; Zip Code Leander, TX 78641 | | | Amount of Contribution (\$) | \$26.25 |
| | • | pation / Job title (See Instructions) mom/sales and marketing | Employer (See Instructions | () | | |
| | | - | | | | |

| | MONET | ARY POLITICAL CONTRIBUT | IONS | | SCHEDUL | E A1 |
|---|--------------------------------|--|------------------------------|----|---|-------------|
| | The Instru | ction Guide explains how to complete this | s form. | 1 | Total pages Schedule A1: Sch: 10/45 Rpt: 13/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 09/26/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$26.25 |
| _ | <u> </u> | Leander, TX 78641 | | Ĺ | | |
| 8 | | pation / Job title (See Instructions) mom/sales and marketing | 9 Employer (See Instructions | S) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (IED avis, Laura Contributor address; City; State; Zip Code | D#:) | | Amount of Contribution (\$) | \$10.50 |
| | Dringinal occu | Leander, TX 78641 pation / Job title (See Instructions) | Employer (See Instructions | c) | | |
| | | mom/sales and marketing | Employer (See instructions | 5) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (IEDavis, Laura Contributor address; City; State; Zip Code | D#:) | | Amount of Contribution (\$) | \$78.75 |
| | | Leander, TX 78641 | | | | |
| | | pation / Job title (See Instructions) mom/sales and marketing | Employer (See Instructions | s) | | |
| | Date 08/06/2024 | Full name of contributor out-of-state PAC (IED) Dreams to Reality, LLC Contributor address; City; State; Zip Code Leander, TX 78641 | D#:) | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (IED Dunn, Lou Ann Contributor address; City; State; Zip Code Leander, TX 78641 | | | Amount of Contribution (\$) | \$75.00 |
| | Principal occu Financial Se | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | | | - 1 | | | |

| | MONET | ARY POLITICAL CONTRIBUT | TIONS | SCHEDULE A1 | | |
|---|--------------------------------|---|-------------------------------|---------------------|---|-----------|
| | The Instru | ction Guide explains how to complete th | is form. | 1 | Total pages Schedule A1: Sch: 11/45 Rpt: 14/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 08/29/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$25.00 |
| _ | Deinsinal assu | Leander, TX 78641 | O Francisco (Con Instructions | $\overline{\Gamma}$ | | |
| 8 | Financial Se | pation / Job title (See Instructions) vices | 9 Employer (See Instructions | S) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (I Dunn, Lou Ann Contributor address; City; State; Zip Code Leander, TX 78641 | D#:) | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | | |
| | Financial Se | vices | | | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (IDunn, Lou Ann Contributor address; City; State; Zip Code | D#:) | | Amount of Contribution (\$) | \$21.00 |
| | | Leander, TX 78641 | | | | |
| | Principal occu Financial Se | oation / Job title (See Instructions) vices | Employer (See Instructions | 5) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (IDunn, Lou Ann Contributor address; City; State; Zip Code Leander, TX 78641 | D#:) | • | Amount of Contribution (\$) | \$25.00 |
| | Principal occu Financial Se | oation / Job title (See Instructions) vices | Employer (See Instructions | 5) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (IDunn, Lou Ann Contributor address; City; State; Zip Code Leander, TX 78641 | D#:) | | Amount of Contribution (\$) | \$105.00 |
| | Principal occu Financial Se | oation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | | | 1 | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | DNS | SCHEDULE A1 | | | |
|---|----------------------------------|--|------------------------------|----------------|---|-----------|--|
| | The Instruc | ction Guide explains how to complete this t | form. | 1 | Total pages Schedule A1: Sch: 12/45 Rpt: 15/66 | | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) | |
| 4 | Date 08/29/2024 | Full name of contributor | _ | 7 | Amount of Contribution (\$) | \$150.00 | |
| _ | | Cedar Park, TX 78613 | I | | | | |
| 8 | Principal occu business ow | pation / Job title (See Instructions) ner | 9 Employer (See Instructions | 5) | | | |
| | Date 08/29/2024 | Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$20.00 | |
| | Principal occu | Cedar Park, TX 78613 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> ;) | | | |
| | business ow | | | , | | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#:_Ecklund, Kathy Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$10.00 | |
| | | Leander, TX 78641 | | | | | |
| | Principal occu sr director sa | pation / Job title (See Instructions) les ops | Employer (See Instructions | 5) | | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#: Ecklund, Kathy Contributor address; City; State; Zip Code Leander, TX 78641 | | | Amount of Contribution (\$) | \$210.00 | |
| | Principal occu sr director sa | oation / Job title (See Instructions) les ops | Employer (See Instructions | 5) | | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#:_Edwards, Guy Contributor address; City; State; Zip Code Cedar Park, TX 78613 | | | Amount of Contribution (\$) | \$210.00 | |
| | Principal occu Retired Sale | oation / Job title (See Instructions) | Employer (See Instructions | 5) | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|-------------------------------|--|------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 13/45 Rpt: 16/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 07/05/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$130.25 |
| _ | | Georgetown, TX 78633 | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#: Elton, Linda Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$10.50 |
| | Dringing aggr | Georgetown, TX 78633 | Employer (Coo Instructions | | | |
| | Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$10.50 |
| | | Georgetown, TX 78633 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_Elton, Regg Contributor address; City; State; Zip Code Georgetown, TX 78633 | | | Amount of Contribution (\$) | \$157.50 |
| | Principal occuretired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID#:_ Estill, Beckye Contributor address; City; State; Zip Code Liberty Hill, TX 78642 | | | Amount of Contribution (\$) | \$26.25 |
| | Principal occu court clerk | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | • | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDULE | ■ A1 |
|---|----------------------------------|---|------------------------------|----|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 14/45 Rpt: 17/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | Filers) |
| 4 | Date 08/16/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$84.00 |
| _ | | Liberty Hill, TX 78642 | | | | |
| 8 | Principal occu court clerk | pation / Job title (See Instructions) | 9 Employer (See Instructions | i) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$26.25 |
| | Dringing agg | Liberty Hill, TX 78642 | Employer (Coo Instructions | _ | | |
| | court clerk | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID#:_ Estill, Beckye Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$26.25 |
| | | Liberty Hill, TX 78642 | | | | |
| | Principal occu court clerk | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID#:_Evans, Michelle Contributor address; City; State; Zip Code Round Rock, TX 78664 | | | Amount of Contribution (\$) | \$10.50 |
| | Principal occu Political Dire | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#:_ Everett, Pauline Contributor address; City; State; Zip Code Leander, TX 78641 | | | Amount of Contribution (\$) | \$10.00 |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions | ·) | | |
| | | , | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULE | ■ A1 |
|---|----------------------------------|---|------------------------------|----------|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 15/45 Rpt: 18/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | ı Filers) |
| 4 | Date 08/29/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$1.00 |
| | | Leander, TX 78641 | | | | |
| 8 | Principal occu retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 08/08/2024 | Full name of contributor out-of-state PAC (ID#:_ Everett, Pauline Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$42.00 |
| | Dringing aggr | Leander, TX 78641 | Employer (Coo Instructions | <u></u> | | |
| | retired | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID#:_Flores, Rita Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$21.00 |
| | | Leander, TX 78641 | | | | |
| | Principal occu retired realto | pation / Job title (See Instructions) r | Employer (See Instructions | 5) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#:_ Friedrich, Susan Contributor address; City; State; Zip Code Georgetown, TX 78628 | | | Amount of Contribution (\$) | \$10.50 |
| | Principal occu bookkeeper | pation / Job title (See Instructions) | Employer (See Instructions | <u>(</u> | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (ID#:_Friedrich, Susan Contributor address; City; State; Zip Code Georgetown, TX 78628 |) | | Amount of Contribution (\$) | \$42.00 |
| | Principal occu bookkeeper | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | SCHEDULE A1 | | | |
|---|------------------------------|---|------------------------------|---|---|-----------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 16/45 Rpt: 19/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 09/26/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$26.25 |
| | | Georgetown, TX 78628 | | | | |
| 8 | Principal occu bookkeeper | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_Friedrich, Susan Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$157.50 |
| | Dringinal occu | Georgetown, TX 78628 pation / Job title (See Instructions) | Employer (See Instructions | \ | | |
| | bookkeeper | Janott 7 Job line (See Instructions) | Employer (See instructions |) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#:_Friese, Katherine Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$78.75 |
| | | Leander, TX 78641 | _ | | | |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#:_ Friese, Katherine Contributor address; City; State; Zip Code Leander, TX 78641 | | | Amount of Contribution (\$) | \$20.00 |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_Friese, Katherine Contributor address; City; State; Zip Code Leander, TX 78641 | | | Amount of Contribution (\$) | \$262.50 |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUT | TONS | | SCHEDUL | E A1 |
|---|-------------------------------|--|------------------------------|----------------|---|-------------|
| | The Instru | ction Guide explains how to complete thi | is form. | 1 | Total pages Schedule A1: Sch: 17/45 Rpt: 20/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 09/19/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$157.50 |
| _ | | Austin, TX 78725 | 1 | | | |
| 8 | Principal occu business ow | pation / Job title (See Instructions) ner | 9 Employer (See Instructions | s) | | |
| | Date 08/08/2024 | Full name of contributor out-of-state PAC (II Garriss, Melissa Contributor address; City; State; Zip Code | D#:) | | Amount of Contribution (\$) | \$150.00 |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | Employer (See Instructions | e) | | |
| | Mental Healt | · · · · · · · · · · · · · · · · · · · | Employer (See instructions | 3) | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (II Gary, Ge'Nell Contributor address; City; State; Zip Code | D#:) | | Amount of Contribution (\$) | \$21.00 |
| | | Austin, TX 78735 | | | | |
| | Principal occu HR Advisor | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (II Gary, Ge'Nell Contributor address; City; State; Zip Code Austin, TX 78735 | D#:) | | Amount of Contribution (\$) | \$78.75 |
| | Principal occu HR Advisor | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (II Gochenour, Gloria Contributor address; City; State; Zip Code Leander, TX 78641 | D#:) | | Amount of Contribution (\$) | \$26.25 |
| | Principal occu Retired RN | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | | | • | | | |

| | MONET | ARY POLITICAL CONTRIBUTI | ONS | | SCHEDULI | ■ A1 |
|---|----------------------------------|---|------------------------------|----------------|---|-------------|
| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 18/45 Rpt: 21/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | ı Filers) |
| 4 | Date 09/26/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$25.00 |
| _ | | Leander, TX 78641 | 1 | L | | |
| 8 | Principal occu Retired RN | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID Gomez, Melva Contributor address; City; State; Zip Code | #:) | | Amount of Contribution (\$) | \$24.00 |
| | Principal occu | Round Rock, TX 78665 pation / Job title (See Instructions) | Employer (See Instructions | 2) | | |
| | staff for Card | | Employer (Occ mondone) | ٥, | | |
| | Date 09/24/2024 | Full name of contributor out-of-state PAC (ID Gomez, Melva Contributor address; City; State; Zip Code | #:) | | Amount of Contribution (\$) | \$12.00 |
| | | Round Rock, TX 78665 | | | | |
| | Principal occu staff for Card | oation / Job title (See Instructions) line Harris | Employer (See Instructions | 5) | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID Goncalez, Viviane Contributor address; City; State; Zip Code Pflugerville, TX 78660 | #:) | | Amount of Contribution (\$) | \$10.50 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> S) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID Griffin, Jenny Contributor address; City; State; Zip Code Leander, TX 78641 | #:) | • | Amount of Contribution (\$) | \$21.00 |
| | Principal occu Homemaker | oation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | | | | | | |

| | MONET | NETARY POLITICAL CONTRIBUTIONS | | | | SCHEDULE A1 | | | |
|---|---------------------------------|--|---------------|----------------------------|---------------------|---|-----------|--|--|
| | The Instruc | ction Guide explains how to comp | lete this for | m. | 1 | Total pages Schedule A1: Sch: 19/45 Rpt: 22/66 | | | |
| 2 | FILER NAME Leander Are | a Republican Women | | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) | | |
| 4 | Date 09/05/2024 | Full name of contributor out-of-sta Grissom, Terri Contributor address; City; State; Zip Code | ate PAC (ID#: | | 7 | Amount of Contribution (\$) | \$210.00 | | |
| _ | Delicalization | Leander, TX 78641 | la la | Frankrije (Construction | $\overline{\Gamma}$ | | | | |
| 8 | Retired IT Ma | pation / Job title (See Instructions) anager | 9 | Employer (See Instructions | 5) | | | | |
| | Date 07/25/2024 | Harclerode, Barsa | | | | Amount of Contribution (\$) | \$21.00 | | |
| | D: : 1 | Leander, TX 78641 | 1 | 5 1 (2 1 1 1 | <u></u> | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | | | |
| | Date 08/06/2024 | Full name of contributor out-of-stated under the contributor address; City; State; Zip Code | ate PAC (ID#: | | | Amount of Contribution (\$) | \$200.00 | | |
| | | Leander, TX 78641 | | | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | s) | | | | |
| | Date 09/20/2024 | Harris-Davila, Caroline | |) | | Amount of Contribution (\$) | \$225.00 | | |
| | Principal occu policy adviso | oation / Job title (See Instructions) r | | Employer (See Instructions | s) | | | | |
| | Date 08/29/2024 | Hart, Karen | ate PAC (ID#: | | | Amount of Contribution (\$) | \$10.00 | | |
| | Principal occu retired accou | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | | | |
| | | 9 | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | SCHEDULE A1 | | |
|---|----------------------------------|--|------------------------------|-------------|---|-----------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 20/45 Rpt: 23/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 08/29/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$25.00 |
| _ | | Leander, TX 78641 | | | | |
| 8 | Principal occu Insurance | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 08/29/2024 | Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$40.00 |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Insurance | | | | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#: Harvey, Toni L Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$200.00 |
| | | Leander, TX 78641 | | | | |
| | Principal occu HR administr | pation / Job title (See Instructions) rator | Employer (See Instructions |) | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (ID#:_ Haze, Crystal Contributor address; City; State; Zip Code Leander, TX 78641 |) | | Amount of Contribution (\$) | \$210.00 |
| | Principal occu financial syst | pation / Job title (See Instructions) ems analyst | Employer (See Instructions |) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_ Heffernan, Mary P Lombardo Contributor address; City; State; Zip Code Austin, TX 78728 | | | Amount of Contribution (\$) | \$262.50 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONEI | ARY POLITICAL (| CONTRIBUTIO | ONS | | SCHEDUL | E A1 |
|---|---------------------------|---|-------------------------|------------------------------|-----------|---|-------------|
| | The Instru | ction Guide explains how | to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 21/45 Rpt: 24/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 07/19/2024 | Full name of contributor Herrera, DianeContributor address; City; St | out-of-state PAC (ID#:_ | | 7 | Amount of Contribution (\$) | \$26.25 |
| | | Leander, TX 78641 | , | <u> </u> | Ĺ | | |
| 8 | | pation / Job title (See Instructions ner, financial software firm | 5) | 9 Employer (See Instructions | 5) | | |
| | Date 07/19/2024 | Full name of contributor Herrera, Diane Contributor address; City; Si | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$42.00 |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions | 3) | Employer (See Instructions | <u>s)</u> | | |
| | | ner, financial software firm | ,, | Employer (See mandedone | ٠, | | |
| | Date 08/29/2024 | Full name of contributor Herrera, Diane Contributor address; City; Si | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | \$125.00 |
| | | Leander, TX 78641 | | | | | |
| | | pation / Job title (See Instructions ner, financial software firm | s) | Employer (See Instructions | s) | | |
| | Date 08/08/2024 | Full name of contributor Herrera, Diane Contributor address; City; Si Leander, TX 78641 | |) | | Amount of Contribution (\$) | \$250.00 |
| | | pation / Job title (See Instructions ner, financial software firm | s) | Employer (See Instructions | 5) | | |
| | Date 09/12/2024 | Full name of contributor Herrera, Diane Contributor address; City; St | out-of-state PAC (ID#:_ | | • | Amount of Contribution (\$) | \$26.25 |
| | | pation / Job title (See Instructions ner, financial software firm | s) | Employer (See Instructions | 5) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUT | ΓIONS | | SCHEDUL | E A1 |
|---|----------------------------|---|------------------------------|--------|---|-------------|
| | The Instruc | ction Guide explains how to complete th | is form. | 1 | Total pages Schedule A1: Sch: 22/45 Rpt: 25/66 | |
| 2 | FILER NAME Leander Area | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 08/29/2024 | Full name of contributor out-of-state PAC (I Hold, Pam Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$75.00 |
| | | Austin, TX 78717 | | | | |
| 8 | Principal occur Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Date 08/29/2024 | Contributor address; City; State; Zip Code | ID#:) | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | Austin, TX 78717 Dation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Retired | | | | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (I Hold, Pam Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$21.00 |
| | | Austin, TX 78717 | | | | |
| | Principal occu Retired | oation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date 08/08/2024 | Full name of contributor out-of-state PAC (I Hold, Pam Contributor address; City; State; Zip Code Austin, TX 78717 | ID#:) | | Amount of Contribution (\$) | \$125.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (I Hold, Pam Contributor address; City; State; Zip Code Austin, TX 78717 | D#:) | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | | | • | | | |

| | MONET | ARY POLITICAL C | NS | | SCHEDULE A1 | | | |
|---|---------------------------------|--|------------------------|------------------------------|---------------|---|-----------|--|
| | The Instru | ction Guide explains how t | to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 23/45 Rpt: 26/66 | | |
| 2 | FILER NAME Leander Are | a Republican Women | | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) | |
| 4 | Date 09/12/2024 | 5 Full name of contributor Hold, Pam6 Contributor address; City; State | |) | 7 | Amount of Contribution (\$) | \$105.00 | |
| | | Austin, TX 78717 | | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | • | 9 Employer (See Instructions | 5) | | | |
| | Date 08/29/2024 | Full name of contributor Holliman, Kathie Contributor address; City; Stat | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$25.00 | |
| | Principal occu | Austin, TX 78708 pation / Job title (See Instructions) | | Employer (See Instructions | - S) | | | |
| | owner, Hollid | | | | , | | | |
| | Date 09/26/2024 | Full name of contributor [Holliman, Kathie Contributor address; City; Stat | out-of-state PAC (ID#: |) | • | Amount of Contribution (\$) | \$30.00 | |
| | | Austin, TX 78708 | | | | | | |
| | Principal occu owner, Hollic | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | | |
| | Date 09/26/2024 | Full name of contributor [Hysmith, Luann Contributor address; City; Stat | |) | • | Amount of Contribution (\$) | \$210.00 | |
| | Principal occu nurse | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | | |
| | Date 08/01/2024 | Full name of contributor Jamison, Diana Contributor address; City; Stat Leander, TX 78641 | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$42.00 | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | s) | | | |
| | | | L | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULI | ■ A1 |
|---|---------------------------------|---|-------------------------------|----------|---|-------------|
| | The Instruc | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 24/45 Rpt: 27/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | ı Filers) |
| 4 | Date 08/29/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$75.00 |
| _ | Deinsinal assu | Leander, TX 78641 | O Franksian (Cas Instructions | _ | | |
| 8 | retired teach | pation / Job title (See Instructions) er | 9 Employer (See Instructions |) | | |
| | Date 08/29/2024 | Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | retired teach | | h - 2 - (| , | | |
| | Date 09/26/2024 | Full name of contributor | | | Amount of Contribution (\$) | \$25.00 |
| | | Leander, TX 78641 | | | | |
| | Principal occu retired teach | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (ID#:_ Jones, Jenifer Contributor address; City; State; Zip Code Cedar Park, TX 78613 | | | Amount of Contribution (\$) | \$78.75 |
| | Principal occu Registered N | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID#:_ Juhasz, Joann Contributor address; City; State; Zip Code Georgetown, TX 78633 | | | Amount of Contribution (\$) | \$10.50 |
| | Principal occu Retired | oation / Job title (See Instructions) | Employer (See Instructions | () | | |
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| | MONET | ARY POLITICAL CO | S | | SCHEDULE A1 | | | |
|---|---------------------------|---|------------------------------------|----------------------------|-------------|---|-----------|--|
| | The Instru | ction Guide explains how to | complete this form | n. | 1 | Total pages Schedule A1: Sch: 25/45 Rpt: 28/66 | | |
| 2 | FILER NAME Leander Are | a Republican Women | | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) | |
| 4 | Date 08/29/2024 | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$10.00 | |
| | | Cedar Park, TX 78613 | | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 | Employer (See Instructions | i) | | | |
| | Date 07/05/2024 | Full name of contributor Keith, Allison Contributor address; City; State; | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$42.00 | |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | | Employer (See Instructions | :) | | | |
| | retired | (************************************** | | | , | | | |
| | Date 08/22/2024 | Full name of contributor Keith, Allison Contributor address; City; State; | out-of-state PAC (ID#: Zip Code |) | | Amount of Contribution (\$) | \$157.50 | |
| | | Leander, TX 78641 | | | | | | |
| | Principal occu retired | pation / Job title (See Instructions) | | Employer (See Instructions | i) | | | |
| | Date 08/16/2024 | Keith, Allison | out-of-state PAC (ID#: Zip Code | | | Amount of Contribution (\$) | \$52.50 | |
| | Principal occu retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | | |
| | Date 08/16/2024 | Kreimeyer, Virginia | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$73.50 | |
| | • | pation / Job title (See Instructions) F & Professor | | Employer (See Instructions | 5) | | | |
| | | | I | | | | | |

| | MONET | ARY POLITICAL CONTRIBUT | | SCHEDULE A1 | | | |
|---|------------------------------|---|-------------------------------------|-------------|---|-----------|--|
| | The Instru | ction Guide explains how to complete thi | s form. | 1 | Total pages Schedule A1: Sch: 26/45 Rpt: 29/66 | | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) | |
| 4 | Date 09/24/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$59.00 | |
| | | Leander, TX 78641 | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instruction: | is) | | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (II Lindemann, Matthew Contributor address; City; State; Zip Code | D#:) | | Amount of Contribution (\$) | \$157.50 | |
| | Principal occu | Georgetown, TX 78627 pation / Job title (See Instructions) | Employer (See Instruction: | 15) | | | |
| | Constable | | Employer (eee meadeach | .5) | | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (II Lindemann, Matthew Contributor address; City; State; Zip Code | D#:) | | Amount of Contribution (\$) | \$26.25 | |
| | | Georgetown, TX 78627 | | | | | |
| | Principal occu Constable | pation / Job title (See Instructions) | Employer (See Instruction: | ns) | | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (II Lopez, Rachel Contributor address; City; State; Zip Code Austin, TX 78727 | D#:) | | Amount of Contribution (\$) | \$26.25 | |
| | Principal occu LISD Music | pation / Job title (See Instructions) Instructor | Employer (See Instruction | ns) | | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (II Marler, Melinda Contributor address; City; State; Zip Code Georgetown, TX 78633 | D#:) | | Amount of Contribution (\$) | \$10.00 | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instruction: | ns) | | | |
| | | | | | | | |

| | MONET | MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDULE A1 | | |
|---|--------------------------------|--|-------------|----------------------------|---------|---|-----------|--|
| | The Instru | ction Guide explains how to complet | te this for | m. | 1 | Total pages Schedule A1: Sch: 27/45 Rpt: 30/66 | | |
| 2 | FILER NAME Leander Are | a Republican Women | | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) | |
| 4 | Date 08/29/2024 | Full name of contributor out-of-state in Martinov, Lucy Contributor address; City; State; Zip Code | - |) | 7 | Amount of Contribution (\$) | \$75.00 | |
| _ | | Leander, TX 78641 | | | <u></u> | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 | Employer (See Instructions | 5) | | | |
| | Date 09/26/2024 | McDaniel, Linda | PAC (ID#: |) | | Amount of Contribution (\$) | \$200.00 | |
| | | Georgetown, TX 78628 | | 5 1 (0 1 1 1 | <u></u> | | | |
| | retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | | |
| | Date 08/16/2024 | Full name of contributor out-of-state of McDonald, Kate Contributor address; City; State; Zip Code | PAC (ID#: |) | | Amount of Contribution (\$) | \$130.25 | |
| | | Leander, TX 78641 | | | | | | |
| | Principal occu business ope | pation / Job title (See Instructions) erations | | Employer (See Instructions | s) | | | |
| | Date 08/16/2024 | Full name of contributor out-of-state in McDonald, Katharine Contributor address; City; State; Zip Code Leander, TX 78641 | - |) | | Amount of Contribution (\$) | \$131.25 | |
| | Principal occu business ope | oation / Job title (See Instructions) erations | | Employer (See Instructions | 5) | | | |
| | Date 08/29/2024 | Full name of contributor out-of-state McDonald, Stacy Contributor address; City; State; Zip Code Leander, TX 78641 | |) | | Amount of Contribution (\$) | \$25.00 | |
| | | pation / Job title (See Instructions) grammer/Data Analyst | | Employer (See Instructions | 5) | | | |
| | | - • | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | | SCHEDULE A1 | | |
|---|---------------------------------|--|--------------------------------|----------------|---|-----------|
| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 28/45 Rpt: 31/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 08/16/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$10.50 |
| _ | Deignaignal | Cedar Park, TX 78613 | To Francisco (Con Instructions | Ţ | | |
| 8 | Retired Minis | pation / Job title (See Instructions) ster | 9 Employer (See Instructions | 5) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID# McGee, Victoria Contributor address; City; State; Zip Code | :) | | Amount of Contribution (\$) | \$10.50 |
| | Dringing agg | Cedar Park, TX 78613 | Employer (See Instructions | <u></u> | | |
| | Retired Minis | pation / Job title (See Instructions) stry | Employer (See Instructions | 5) | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID# Mcgee, Vicki Contributor address; City; State; Zip Code | :) | • | Amount of Contribution (\$) | \$42.00 |
| | | Cedar Park, TX 78613 | | | | |
| | Principal occu Retired Minis | pation / Job title (See Instructions) ster | Employer (See Instructions | 5) | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID# Mcgee, Vicki Contributor address; City; State; Zip Code Cedar Park, TX 78613 | :) | | Amount of Contribution (\$) | \$14.00 |
| | Principal occu Retired Minis | pation / Job title (See Instructions) | Employer (See Instructions | <u>l</u> 5) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID# Militello, Colleen Contributor address; City; State; Zip Code Leander, TX 78641 | :) | | Amount of Contribution (\$) | \$150.00 |
| | Principal occu Retired Real | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | | | 1 | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | | SCHEDULE A1 | | |
|---|-----------------------------|---|------------------------------|----------------|---|-----------|
| | The Instruc | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 29/45 Rpt: 32/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#: Militello, Colleen Contributor address; City; State; Zip Code | _ | 7 | Amount of Contribution (\$) | \$50.00 |
| • | Dringinal occu | Leander, TX 78641 pation / Job title (See Instructions) | 9 Employer (See Instructions | <u>''</u> | | |
| 0 | Retired Real | | 5 Employer (See instructions | ·) | | |
| | Date 08/29/2024 | Contributor address; City; State; Zip Code | | • | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | | |
| | Retired Real | | | | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID#: Moore, Laurie Contributor address; City; State; Zip Code |) | • | Amount of Contribution (\$) | \$52.50 |
| | | Austin, TX 78730 | | | | |
| | Principal occu Homemaker | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#: Naizer, Nancy Contributor address; City; State; Zip Code Leander, TX 78641 | | • | Amount of Contribution (\$) | \$10.00 |
| | • | pation / Job title (See Instructions) phic Designer | Employer (See Instructions | 5) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#: Naizer, Nancy Contributor address; City; State; Zip Code Leander, TX 78641 | | • | Amount of Contribution (\$) | \$15.00 |
| | • | pation / Job title (See Instructions) phic Designer | Employer (See Instructions | 5) | | |
| | remed Old | Jillo Designer | | | | |

| | MONET | ARY POLITICAL C | NS | | SCHEDULE A1 | | | |
|---|-------------------------------|---|---|------------------------------|----------------|---|-----------|--|
| | The Instru | ction Guide explains how | to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 30/45 Rpt: 33/66 | | |
| 2 | FILER NAME Leander Are | a Republican Women | | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) | |
| 4 | Date 09/26/2024 | 5 Full name of contributor Naizer, Nancy6 Contributor address; City; Sta | |) | 7 | Amount of Contribution (\$) | \$10.00 | |
| | | Leander, TX 78641 | | | | | | |
| 8 | | pation / Job title (See Instructions) phic Designer | | 9 Employer (See Instructions | s) | | | |
| | Date 08/16/2024 | Full name of contributor Nardecchia, Shana Contributor address; City; Sta | out-of-state PAC (ID#: tte; Zip Code |) | • | Amount of Contribution (\$) | \$78.75 | |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> S) | | | |
| | VP Marketin | 9 | | | | | | |
| | Date 08/08/2024 | Full name of contributor Nardecchia, Shana Contributor address; City; Sta | out-of-state PAC (ID#: tte; Zip Code |) | • | Amount of Contribution (\$) | \$75.00 | |
| | | Leander, TX 78641 | | | | | | |
| | Principal occu VP Marketin | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | | |
| | Date 08/16/2024 | Full name of contributor Neal, Teresa Contributor address; City; Sta | out-of-state PAC (ID#: ite; Zip Code |) | • | Amount of Contribution (\$) | \$210.00 | |
| | Principal occu Homemake | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | | |
| | Date 09/12/2024 | Full name of contributor Neff, Cheryl Contributor address; City; Sta Austin, TX 78717 | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$26.25 | |
| | Principal occu Realtor | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | | |
| | | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDULE | ■ A1 |
|---|---------------------------------|--|------------------------------|---|---|-------------|
| | The Instruc | ction Guide explains how to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 31/45 Rpt: 34/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission Filers) 00085167 | |
| 4 | Date 09/26/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$25.00 |
| _ | Daine in a la casa | AUSTIN, TX 78731 | | | | |
| 8 | Office Admin | | 9 Employer (See Instructions |) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#: Owren, Sherilyn Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$10.00 |
| | Dringinal accu | Leander, TX 78641 pation / Job title (See Instructions) | Employer (See Instructions | | | |
| | retired teach | | Employer (See instructions |) | | |
| | Date 09/24/2024 | Full name of contributor uut-of-state PAC (ID#:_ Owren, Sherilyn Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$27.00 |
| | | Leander, TX 78641 | | | | |
| | Principal occu retired teach | oation / Job title (See Instructions) er | Employer (See Instructions |) | | |
| | Date 09/24/2024 | Full name of contributor out-of-state PAC (ID#:_ Owren, Sherilyn Contributor address; City; State; Zip Code Leander, TX 78641 |) | | Amount of Contribution (\$) | \$27.00 |
| | Principal occu retired teach | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#:_ Page, Mary Contributor address; City; State; Zip Code Leander, TX 78641 | | | Amount of Contribution (\$) | \$10.00 |
| | Principal occu retired teach | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | 22 22 3000 | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDULE | ■ A1 |
|---|--------------------------------|--|------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 32/45 Rpt: 35/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | Filers) |
| 4 | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$20.00 |
| | | Cedar Park, TX 78613 | | | | |
| 8 | Principal occu Retired Acco | | 9 Employer (See Instructions |) | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID#: Pantalion-Parker, KATHRYN Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$21.00 |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | • | ultant/ City Councilmember-Leander | pieyer (eee meadeans | , | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#: Pantalion-Parker, Kathryn Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$78.75 |
| | | Leander, TX 78641 | | | | |
| | | oation / Job title (See Instructions) ultant/ City Councilmember-Leander | Employer (See Instructions |) | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$42.00 |
| | Principal occu Corporate C | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (ID#: Pearce, Christine Contributor address; City; State; Zip Code Leander, TX 78641 | | | Amount of Contribution (\$) | \$21.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
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| | MONET | ARY POLITICAL CONTRIBUTI | ONS | | SCHEDUL | E A1 |
|---|----------------------------------|---|--|----------------|---|-------------|
| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 33/45 Rpt: 36/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 09/12/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$157.50 |
| | | Leander, TX 78641 | T | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Date 07/19/2024 | Full name of contributor out-of-state PAC (ID# Pipes, Debbie Contributor address; City; State; Zip Code | :) | • | Amount of Contribution (\$) | \$40.00 |
| | Principal occu | Austin, TX 78717 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> S) | | |
| | Retired | | | | | |
| | Date 07/19/2024 | Full name of contributor out-of-state PAC (ID# Pipes, Debbie Contributor address; City; State; Zip Code | <u>; </u> | | Amount of Contribution (\$) | \$15.00 |
| | | Austin, TX 78717 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID# Pipes, Debbie Contributor address; City; State; Zip Code Austin, TX 78717 | ÷) | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions | <u>I</u> S) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID# Prater, Gerald Contributor address; City; State; Zip Code Leander, TX 78641 | :) | | Amount of Contribution (\$) | \$10.00 |
| | Principal occu Retired Milita | pation / Job title (See Instructions) ury | Employer (See Instructions | 5) | | |
| | | | <u>'</u> | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | DNS | | SCHEDUL | E A1 |
|---|--------------------------------|--|------------------------------|--------|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 34/45 Rpt: 37/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 08/22/2024 | Full name of contributor out-of-state PAC (ID#:_Pulver, Marie Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$52.25 |
| | | Leander, TX 78641 | | | | |
| 8 | Principal occu retired | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (ID#:_Pulver, Marie Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$26.25 |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | Employer (See Instructions | ;) | | |
| | retired | | | , | | |
| | Date 09/19/2024 | Full name of contributor out-of-state PAC (ID#:_Pulver, Marie Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$26.25 |
| | | Leander, TX 78641 | | | | |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_ Pulver, Marie Contributor address; City; State; Zip Code Leander, TX 78641 |) | | Amount of Contribution (\$) | \$183.75 |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#:_Purham, Randy Contributor address; City; State; Zip Code Austin, TX 78741 |) | | Amount of Contribution (\$) | \$20.00 |
| | Principal occu Retired Cons | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | . toured cont | | | | | |

| | MONET | ARY POLITICAL CONTRIE | BUTIOI | NS | | SCHEDULI | ■ A1 |
|---|--------------------------------|---|----------------|--------------------------------|---------|---|-------------|
| | The Instruc | etion Guide explains how to comple | te this fo | rm. | 1 | Total pages Schedule A1: Sch: 35/45 Rpt: 38/66 | |
| 2 | FILER NAME Leander Area | a Republican Women | | | 3 | Filer ID (Ethics Commission 00085167 | ı Filers) |
| 4 | Date 08/27/2024 | Full name of contributor out-of-state | PAC (ID#: | | 7 | Amount of Contribution (\$) | \$27.00 |
| _ | Deinainal assu | Austin, TX 78701 | 1. | - Franklavar (Coo Instructions | <u></u> | | |
| 8 | Self-employe | pation / Job title (See Instructions) | l ^s | Employer (See Instructions | s) | | |
| | Date 08/29/2024 | Rightmyer, Kathryn | PAC (ID#: |) | | Amount of Contribution (\$) | \$10.00 |
| | | Cedar Park, TX 78750 | | | | | |
| | Principal occup Retired Teac | pation / Job title (See Instructions) her | | Employer (See Instructions | s) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state Rightmyer, Kathryn Contributor address; City; State; Zip Code | PAC (ID#: | | | Amount of Contribution (\$) | \$10.00 |
| | | Cedar Park, TX 78750 | | | | | |
| | Principal occu Retired Teac | pation / Job title (See Instructions) her | | Employer (See Instructions | 5) | | |
| | Date 08/27/2024 | Robertson, Dr. Evelyn | PAC (ID#: |) | • | Amount of Contribution (\$) | \$27.00 |
| | Principal occu Executive Co | pation / Job title (See Instructions) Insultant | | Employer (See Instructions | 5) | | |
| | Date 08/16/2024 | Full name of contributor out-of-state Robertson, Dr. Evelyn Contributor address; City; State; Zip Code Liberty Hill, TX 78642 | PAC (ID#: |) | | Amount of Contribution (\$) | \$21.00 |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Executive Co | การนแสมไ | <u> </u> | | | | |

| | MONET | ARY POLITICAL (| CONTRIBUTIO | ONS | | SCHEDUL | E A1 |
|---|--------------------------------|---|-------------------------|------------------------------|----------------|---|-------------|
| | The Instru | ction Guide explains hov | v to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 36/45 Rpt: 39/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 09/24/2024 | 5 Full name of contributor Robertson, Dr. Evelyn6 Contributor address; City; S | out-of-state PAC (ID#:_ | | 7 | Amount of Contribution (\$) | \$12.00 |
| | | Liberty Hill, TX 78642 | | | | | |
| 8 | Principal occu Executive Co | pation / Job title (See Instructions onsultant | 5) | 9 Employer (See Instructions | S) | | |
| | Date 09/05/2024 | Full name of contributor Salahuddin, Amin Contributor address; City; S Round Rock, TX 78681 | out-of-state PAC (ID#:_ | | • | Amount of Contribution (\$) | \$78.75 |
| | Principal occu | pation / Job title (See Instructions | 5) | Employer (See Instructions | <u> </u> S) | | |
| | Business ow | ner | | | | | |
| | Date 08/29/2024 | Full name of contributor Saletta, Michael Contributor address; City; S | |) | • | Amount of Contribution (\$) | \$25.00 |
| | | Austin, TX 78732 | | | | | |
| | Principal occu Retired | pation / Job title (See Instruction: | 5) | Employer (See Instructions | 5) | | |
| | Date 08/22/2024 | Full name of contributor Salkin, Kyara Contributor address; City; S Cedar park, TX 78641 | out-of-state PAC (ID#:_ | | • | Amount of Contribution (\$) | \$10.50 |
| | Principal occu Human Reso | pation / Job title (See Instructions ources | 5) | Employer (See Instructions | 5) | | |
| | Date 09/26/2024 | Full name of contributor Sano, Wanda Contributor address; City; S Leander, TX 78641 | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$157.50 |
| | Principal occu Retired | pation / Job title (See Instructions | 5) | Employer (See Instructions | 5) | | |
| | | | | 1 | | | |

| | MONET | ARY POLITICAL (| CONTRIBUTIO | ONS | | SCHEDUI | LE A1 |
|---|---------------------------|--|---|------------------------------|----------------|---|--------------|
| | The Instru | ction Guide explains how | to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 37/45 Rpt: 40/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | | 3 | Filer ID (Ethics Commission 00085167 | on Filers) |
| 4 | Date 09/24/2024 | 5 Full name of contributor Sano, Wanda6 Contributor address; City; St | out-of-state PAC (ID#:_ mate; Zip Code | | 7 | Amount of Contribution (\$) | \$27.00 |
| | | Leander, TX 78641 | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions | s) | 9 Employer (See Instructions | s) | | |
| | Date 09/26/2024 | Full name of contributor Schwertner, Charles Contributor address; City; Si | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | Austin, TX 78711 pation / Job title (See Instructions | s) | Employer (See Instructions | <u> </u> s) | | |
| | Date 08/29/2024 | Full name of contributor Shaffer, Barbara Contributor address; City; St | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$26.25 |
| _ | • | Cedar Park, TX 78613 pation / Job title (See Instructions iness Development | s) | Employer (See Instructions | <u> </u> S) | | |
| | Date 08/22/2024 | Full name of contributor Shaffer, Barbara Contributor address; City; Si Cedar Park, TX 78613 | | | | Amount of Contribution (\$) | \$42.00 |
| | • | pation / Job title (See Instructions iness Development | s) | Employer (See Instructions | 5) | | |
| | Date 09/26/2024 | Full name of contributor Shaffer, Barbara Contributor address; City; Si Cedar Park, TX 78613 | out-of-state PAC (ID#:_ ate; Zip Code | | | Amount of Contribution (\$) | \$10.50 |
| | | pation / Job title (See Instructions iness Development | s) | Employer (See Instructions | 5) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | NS | | SCHEDUI | LE A1 |
|---|---------------------------------|--|----------------------------|------------|---|--------------|
| | The Instru | ction Guide explains how to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 38/45 Rpt: 41/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | on Filers) |
| 4 | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$157.50 |
| | | Georgetown, TX 78633 | | | | |
| 8 | Principal occu RN | pation / Job title (See Instructions) | Employer (See Instructions | i) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#: Smith, Stacy Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$10.00 |
| | Principal occu | Burnet, TX 78611 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Rep for Eller | | . , , | , | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#:Smith, Stacy Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$10.00 |
| | | Burnet, TX 78611 | | | | |
| | Principal occu Rep for Eller | pation / Job title (See Instructions) Troxclair | Employer (See Instructions | i) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:Staudt, Edna Contributor address; City; State; Zip Code Leander, TX 78646 | | | Amount of Contribution (\$) | \$105.00 |
| | Principal occu Retired Judg | pation / Job title (See Instructions) | Employer (See Instructions | i) | | |
| | Date 07/19/2024 | Full name of contributor out-of-state PAC (ID#: TFRW Contributor address; City; State; Zip Code Austin, TX 78717 | | | Amount of Contribution (\$) | \$1,600.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | () | | |
| | | <u>'</u> | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|---------------------------------|---|------------------------------|---|---|-------------|
| | The Instruc | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 39/45 Rpt: 42/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 08/29/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$210.00 |
| | | Cedar Park, TX 78613 | | | | |
| 8 | Principal occu Real estate b | pation / Job title (See Instructions) proker | 9 Employer (See Instructions |) | | |
| | Date 08/22/2024 | Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$42.00 |
| | Principal occu | Cedar Park, TX 78613 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Real estate b | proker | | | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID#:_ Teich, Kim Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$10.50 |
| | | Leander, TX 78641 | | | | |
| | | pation / Job title (See Instructions) ance adjuster | Employer (See Instructions |) | | |
| | Date 07/19/2024 | Full name of contributor out-of-state PAC (ID#:_ Texas Comptroller of Public Accounts Contributor address; City; State; Zip Code Austin, TX 78711 |) | | Amount of Contribution (\$) | \$156.53 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#:_ Theisman, Jan Contributor address; City; State; Zip Code Leander, TX 78641 |) | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUT | IONS | | SCHEDUL | E A1 |
|---|---------------------------------|--|------------------------------|----|---|-------------|
| | The Instruc | ction Guide explains how to complete thi | s form. | 1 | Total pages Schedule A1: Sch: 40/45 Rpt: 43/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 08/29/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$10.00 |
| _ | | Cedar Park, TX 78613 | 1 | Ĺ | | |
| 8 | retired nurse | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Date 09/26/2024 | Contributor address; City; State; Zip Code |) #:) | | Amount of Contribution (\$) | \$500.00 |
| | | Austin, TX 78768 pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Realtor Date | Full name of contributor | 24 | _ | Amount of Contribution (\$) | |
| | 08/16/2024 | Full name of contributor out-of-state PAC (IE Turner, Jennifer Contributor address; City; State; Zip Code | .m | | Amount of Continuous (4) | \$42.00 |
| | | Leander, TX 78641 | | | | |
| | Principal occu Retired Teac | pation / Job title (See Instructions) her | Employer (See Instructions | s) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (IE Virissimo, Odette Contributor address; City; State; Zip Code Leander, TX 78641 |)#:) | | Amount of Contribution (\$) | \$26.25 |
| | Principal occu Retired Inter | oation / Job title (See Instructions) or Decorator | Employer (See Instructions | s) | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (IE Virissimo, Odette Contributor address; City; State; Zip Code Leander, TX 78641 | D#:) | | Amount of Contribution (\$) | \$21.00 |
| | • | oation / Job title (See Instructions) or Decorator | Employer (See Instructions | s) | | |
| | | | ' | | | |

| | MONET | ARY POLITICAL CONTRIBU | ΓΙΟΙ | NS | | SCHEDUL | E A1 |
|---|---------------------------|---|-------|----------------------------------|----|---|-------------|
| | The Instruc | ction Guide explains how to complete th | is fo | rm. | 1 | Total pages Schedule A1: Sch: 41/45 Rpt: 44/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 09/05/2024 | Full name of contributor | | | 7 | Amount of Contribution (\$) | \$183.75 |
| _ | Deinsinal assu | Leander, TX 78641 | 10 |) Familia var (Can Jacki vationa | _ | | |
| 8 | Retired Inter | oation / Job title (See Instructions) or Decorator | | Employer (See Instructions | 5) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (Ward, Denise Contributor address; City; State; Zip Code | | | • | Amount of Contribution (\$) | \$25.00 |
| | | Leander, TX 78641 | | | L | | |
| | | oation / Job title (See Instructions) Iinical Research Assoc | | Employer (See Instructions | s) | | |
| | Date 08/08/2024 | Full name of contributor out-of-state PAC (Warren, Zenia Contributor address; City; State; Zip Code | ID#: | | | Amount of Contribution (\$) | \$21.00 |
| | | Killeen, TX 76542 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (Warrick, Amy Contributor address; City; State; Zip Code Leander, TX 78641 | |) | • | Amount of Contribution (\$) | \$104.50 |
| | • | pation / Job title (See Instructions) roker/ business owner | | Employer (See Instructions | 5) | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (Warrick, Amy Contributor address; City; State; Zip Code Leander, TX 78641 | | | • | Amount of Contribution (\$) | \$52.50 |
| | | pation / Job title (See Instructions) roker/ business owner | | Employer (See Instructions | 5) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CONTRI | BUTION | NS | | SCHEDUL | E A1 |
|---|---------------------------------|--|--------------|----------------------------|----------------|---|-------------|
| | The Instru | ction Guide explains how to comple | ete this for | m. | 1 | Total pages Schedule A1: Sch: 42/45 Rpt: 45/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 08/22/2024 | Full name of contributor | |) | 7 | Amount of Contribution (\$) | \$21.00 |
| _ | | Leander, TX 78641 | | | | | |
| 8 | | pation / Job title (See Instructions) roker/ business owner | 9 | Employer (See Instructions | 5) | | |
| | Date 08/08/2024 | Warrick, Amy Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> ;) | | |
| | real estate b | roker/ business owner | | | | | |
| | Date 08/27/2024 | Full name of contributor out-of-state Wheeler, Michael Contributor address; City; State; Zip Code | PAC (ID#: |) | | Amount of Contribution (\$) | \$27.00 |
| | | Boerne, TX 78006 | | | | | |
| | Principal occu Real Estate | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 08/16/2024 | White, Alyson | | | | Amount of Contribution (\$) | \$26.25 |
| | Principal occu research dire | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 09/12/2024 | White, Alyson | |) | | Amount of Contribution (\$) | \$36.75 |
| | Principal occu research dire | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | _ |
| | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULE | ■ A1 |
|---|---------------------------|---|------------------------------|----------------|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 43/45 Rpt: 46/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | Filers) |
| 4 | Date 08/29/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$25.00 |
| _ | | Georgetown, TX 78628 | <u> </u> | Ĺ | | |
| 8 | | pation / Job title (See Instructions) Wilsons office | 9 Employer (See Instructions | 5) | | |
| | Date 08/29/2024 | Full name of contributor out-of-state PAC (ID#:_ Wornardt, Rochelle Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$15.00 |
| | | Georgetown, TX 78628 | · | | | |
| | | pation / Job title (See Instructions) Wilsons office | Employer (See Instructions | 5) | | |
| | Date 08/22/2024 | Full name of contributor out-of-state PAC (ID#:_ Wornardt, Rochelle Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$21.00 |
| | | Georgetown, TX 78628 | | | | |
| | | pation / Job title (See Instructions) Wilsons office | Employer (See Instructions | 5) | | |
| | Date 09/26/2024 | Full name of contributor out-of-state PAC (ID#:_ Wornardt, Rochelle Contributor address; City; State; Zip Code Georgetown, TX 78628 | | | Amount of Contribution (\$) | \$10.50 |
| | • | pation / Job title (See Instructions) Wilsons office | Employer (See Instructions | <u> </u> 5) | | |
| | Date 09/12/2024 | Full name of contributor out-of-state PAC (ID#:_Yeduru, Pulla reddy Contributor address; City; State; Zip Code Leander, TX 78641 |) | | Amount of Contribution (\$) | \$10.50 |
| | • | pation / Job title (See Instructions) Investor and Software Engineer | Employer (See Instructions | 5) | | |
| | Near Estate | mivestor and Sollware Engineer | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | DNS | | SCHEDUL | E A1 |
|---|---------------------------------|---|------------------------------|----------|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 44/45 Rpt: 47/66 | |
| 2 | FILER NAME Leander Are | a Republican Women | | 3 | Filer ID (Ethics Commission 00085167 | n Filers) |
| 4 | Date 08/27/2024 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$27.00 |
| _ | Deinsinal assu | Leander, TX 78641 | Control of Control | <u></u> | | |
| 8 | State Directo | pation / Job title (See Instructions) r | 9 Employer (See Instructions | 5) | | |
| | Date 08/27/2024 | Full name of contributor out-of-state PAC (ID#:_Yelaun, Anna Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$22.00 |
| | Principal occu | Leander, TX 78641 pation / Job title (See Instructions) | Employer (See Instructions | ·/_ | | |
| | State Directo | | Employer (See Instructions |) | | |
| | Date 09/24/2024 | Full name of contributor out-of-state PAC (ID#:_Yelaun, Anna Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$27.00 |
| | | Leander, TX 78641 | | | | |
| | Principal occu State Directo | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 09/05/2024 | Full name of contributor out-of-state PAC (ID#:_thomas, cheryl Contributor address; City; State; Zip Code Leander, TX 89741 |) | | Amount of Contribution (\$) | \$104.50 |
| | Principal occu retired teach | pation / Job title (See Instructions) | Employer (See Instructions | <u>(</u> | | |
| | Date 08/16/2024 | Full name of contributor out-of-state PAC (ID#:_turner, jennifer Contributor address; City; State; Zip Code Leander, TX 78641 | | | Amount of Contribution (\$) | \$26.25 |
| | Principal occu Retired Tead | pation / Job title (See Instructions) her | Employer (See Instructions | 5) | | |
| | | | | | | |

| MONE | TARY POLITICAL CONTRIBUTION | S | SCHEDULE A1 |
|--------------------------------|---|-----------------------------|--|
| The Instru | uction Guide explains how to complete this form | n. | Total pages Schedule A1: Sch: 45/45 Rpt: 48/66 |
| 2 FILER NAME Leander Are | PILER NAME Leander Area Republican Women | | Filer ID (Ethics Commission Filers) 00085167 |
| 4 Date 08/16/2024 | 5 Full name of contributor |) 7 | 7 Amount of Contribution (\$) \$26.25 |
| | Leander, TX 78641 | | |
| 8 Principal occ Retired Tea | | Employer (See Instructions) | |
| Date 09/19/2024 | Contributor address; City; State; Zip Code |) | Amount of Contribution (\$) \$26.25 |
| Principal occ Retired Tea | Leander, TX 78641 rupation / Job title (See Instructions) acher | Employer (See Instructions) | |
| | | | |

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: 49/66 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Leander Area Republican Women 00085167 \$ 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 07/01/2024 Kreimeyer, Virginia \$463.77 Books for Literacy Project 7 Contributor address; City; State; Zip Code Cedar Park, TX 78613 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) Retired USAF & Professor 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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

| Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 1/17 Rpt: 50/66 | Leander Area Republican Women 00085167 |
| 4 Date | 5 Payee name |
| 09/04/2024 | Caroline Harris Davila for State Representative |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$1,000.00 | PO Box 700 |
| | |
| Expenditure from corporate funds | Round Rock, TX 78680 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| LAFENDITORE | Candidate/Officeholder/Political Committee |
| | campaign support |
| 0 Complete ONLY if direct | Candidate/Officeholder name Office sought Office hold |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held H |
| D-4- | |
| Date | Payee name |
| 08/21/2024 | Daily Spread |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$189.44 | 1075 North Lakeline Suite 101 |
| Expenditure from | |
| corporate funds | Cedar Park, TX 78613 |
| 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 catering |
| | Catering |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | o |
| Date | Payee name |
| 09/26/2024 | Dollar tree |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$73.07 | 1335 E. Whitestone Blvd #G-250 |
| Ψ13.01 | 1000 E. Williamstone Biva no 200 |
| Expenditure from corporate funds | Cedar Park, TX 78613 |
| | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description Fivent Expense Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | decorations |
| | |
| 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

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

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

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 2/17 Rpt: 51/66 | Leander Area Republican Women 00085167 |
| 4 Date | 5 Payee name |
| 08/12/2024 | Education Connection |
| 6 Amount (\$) \$309.00 | 7 Payee address; City; State; Zip Code P.O. Box 340052 |
| Expenditure from | |
| corporate funds | Austin, TX 78734 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense event |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | |
| Date | Payee name |
| 07/12/2024 | Facilities Resource Inc. |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$664.13 | 1641 Scottsdale |
| Expenditure from corporate funds | Leander, TX 78641 |
| 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 event |
| | CVCIII |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 09/04/2024 | Facilities Resource Inc. |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$664.13 | 1641 Scottsdale |
| Ψ004.13 | 10-1 000130010 |
| Expenditure from corporate funds | Leander, TX 78641 |
| 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 |
| | event |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| | |
| | |
| Forms provided by Tevas F | thics Commission Washing state by us Version V/A 1.0.48da51f |

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

Reimbursement Solicitation/Fundraising Expense
ental Expense Transportation Equipment & Related Expense
Travel in District
ontract Labor OTHER (enter a category not listed above)

| Credit Card Payment | The Instruction Guide explains how to co | emplete this form. |
|---|---|--|
| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Sch: 3/17 Rpt: 52/66 | Leander Area Republican Women | 00085167 |
| 4 Date | 5 Payee name | |
| 07/25/2024 | Greater Giving | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Co | ode |
| \$1.20 | PO Box 935886 | |
| | | |
| Expenditure from corporate funds | Atlanta, GA 31193 | |
| 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 fees |
| | | 1000 |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sou | light Office held |
| expenditure to benefit C/OF | | egn. Onice note |
| Data | | |
| Date | Payee name | |
| 07/19/2024 | Greater Giving | |
| Amount (\$) | Payee address; City; State; Zip Co | ode |
| \$4.66 | PO Box 935886 | |
| Expenditure from | | |
| corporate funds | Atlanta, GA 31193 | |
| 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 fees |
| | | 1003 |
| Complete <u>ONLY</u> if direct | Candidate/Officeholder name Office sou | gaht Office held |
| expenditure to benefit C/O | | gitt Cince field |
| 5. | | |
| Date | Payee name | |
| 07/05/2024 | Greater Giving | |
| Amount (\$) | Payee address; City; State; Zip Co | ode |
| \$13.31 | PO Box 935886 | |
| Expenditure from | | |
| corporate funds | Atlanta, GA 31193 | |
| 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 |
| | | fees |
| Computer ONUM III | Condidate/Officeholders are a constant of the | Office held |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sou | ght 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/Officenoider/Politica Credit Card Payment | The Instruction Guide explains how to complete this form. | |
|---|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | _ |
| Sch: 4/17 Rpt: 53/66 | Leander Area Republican Women 00085167 | |
| 4 Date | 5 Payee name | _ |
| 08/29/2024 | Greater Giving | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | _ |
| \$43.32 | PO Box 935886 | |
| ¥ .0.02 | | |
| Expenditure from corporate funds | Atlanta, GA 31193 | |
| 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 fees | |
| | lices | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | _ |
| expenditure to benefit C/OI | | |
| | | _ |
| Date | Payee name | |
| 08/22/2024 | Greater Giving | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$49.17 | PO Box 935886 | |
| Expenditure from | | |
| corporate funds | Atlanta, GA 31193 | |
| 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 | |
| | fees | |
| | | _ |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held H | |
| | | |
| Date | Payee name | |
| 08/16/2024 | Greater Giving | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$68.44 | PO Box 935886 | |
| - " | | |
| Expenditure from corporate funds | Atlanta, GA 31193 | |
| 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 | |
| | fees | |
| | | |
| 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 Committee

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

Printing Expense Salaries/Wages/Contract Labor

| Credit Card Payment | The Instruction Guide explains how to complete this form. | |
|----------------------------------|--|----------------------------------|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Fil | er ID (Ethics Commission Filers) |
| Sch: 5/17 Rpt: 54/66 | Leander Area Republican Women 00 | 0085167 |
| 4 Date | 5 Payee name | |
| 08/08/2024 | Greater Giving | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| \$34.77 | PO Box 935886 | |
| | | |
| Expenditure from corporate funds | Atlanta, GA 31193 | |
| 8 PURPOSE | (6) 6 | |
| OF | | f Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, office | ceholder living expense |
| | fees | |
| | | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| expenditure to benefit C/OI | UH | |
| Date | Payee name | |
| 08/01/2024 | Greater Giving | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$9.27 | PO Box 935886 | |
| | | |
| Expenditure from corporate funds | Atlanta, GA 31193 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| OF EXPENDITURE | | f Texas. Complete Schedule T. |
| | Check if Austin, TX, offit fees | cenoider living expense |
| | lees | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| expenditure to benefit C/OI | | Cilide Held |
| Date | Pause same | |
| 09/26/2024 | Payee name Greater Giving | |
| | | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$57.83 | PO Box 935886 | |
| Expenditure from | | |
| corporate funds | Atlanta, GA 31193 | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| EXPENDITURE | 1 003 | f Texas. Complete Schedule T. |
| | Check if Austin, TX, offices | perioraer living expense |
| | | |
| 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 Committee
Credit Card Baymant

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: 6/17 Rpt: 55/66 | Leander Area Republican Women 00085167 | |
| 4 Date | 5 Payee name | |
| 09/19/2024 | Greater Giving | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| \$18.40 | PO Box 935886 | |
| — Foresedit we from | | |
| Expenditure from corporate funds | Atlanta, GA 31193 | |
| 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 fees | |
| | 1003 | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| expenditure to benefit C/OI | | |
| 5. | | |
| Date | Payee name | |
| 09/12/2024 | Greater Giving | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$37.75 | PO Box 935886 | |
| Expenditure from | | |
| corporate funds | Atlanta, GA 31193 | |
| 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 | |
| | fees | |
| Commission ONII V if disposi | Condidate/Officeholder name Office county | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held | |
| | | |
| Date | Payee name | |
| 09/05/2024 | Greater Giving | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$122.90 | PO Box 935886 | |
| Expenditure from | | |
| corporate funds | Atlanta, GA 31193 | |
| 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 | |
| | fees | |
| Operated Objects " | | |
| 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

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 | |
|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 7/17 Rpt: 56/66 | Leander Area Republican Women 00085167 |
| 4 Date | 5 Payee name |
| 07/02/2024 | Hobbs, Dee |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$1,000.00 | 701 CR 134 |
| | |
| Expenditure from corporate funds | Hutto, TX 78634 |
| | |
| 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 |
| | campaign support |
| | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experiulture to beliefft C/O | |
| Date | Payee name |
| 09/26/2024 | Hobby Lobby |
| | , , |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$194.87 | 1501 E. Whitestone Bldg D |
| Evponditure from | |
| Expenditure from corporate funds | Cedar Park, TX 78613 |
| 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 |
| | decorations |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| · | |
| Date | Payee name |
| 08/22/2024 | Hyatt Place |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$114.30 | 1315 East New Hope Drive |
| \$11 noo | |
| Expenditure from | |
| corporate funds | Cedar Park, TX 78641 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Event Expense |
| LAFENDITORE | Check if Austin, TX, officeholder living expense |
| | event |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| | |
| | |
| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political 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/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: 8/17 Rpt: 57/66 | Leander Area Republican Women 00085167 | |
| 4 Date | 5 Payee name | |
| 07/15/2024 | Intuit | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| \$31.98 | 2800 E. Commerce Center Place | |
| | | |
| Expenditure from corporate funds | Tucson, AZ 85706 | |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| | software | |
| | Soluma o | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| expenditure to benefit C/O | | |
| Data | | |
| Date | Payee name | |
| 08/15/2024 | Intuit | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$37.31 | 2800 E. Commerce Center Place | |
| Expenditure from | | |
| corporate funds | Tucson, AZ 85706 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| OF EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. | |
| EXI ENDITORE | Check if Austin, TX, officeholder living expense | |
| | software | |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held | |
| | | |
| Date | Payee name | |
| 09/16/2024 | Intuit | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$37.31 | 2800 E. Commerce Center Place | |
| Evpanditure from | | |
| Expenditure from corporate funds | Tucson, AZ 85706 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| OF EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. | |
| EXPENDITURE | Check if Austin, TX, officeholder living expense | |
| | software | |
| | | |
| 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
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment

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

Printing Expense Salaries/Wages/Contract Labor

| Credit Card Payment | The Instruction Guide explains how to co | omplete this form. |
|---|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Sch: 9/17 Rpt: 58/66 | Leander Area Republican Women | 00085167 |
| 4 Date | 5 Payee name | • |
| 09/24/2024 | Jason's Deli | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Co | ode |
| \$639.11 | 4811 183A Toll Road | |
| | | |
| Expenditure from corporate funds | Cedar Park, TX 78613 | |
| 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 catering |
| | | Catering |
| O Commission ONLY if dispose | Condidate Office helder name | Office hold |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sou | ight Office held |
| | | |
| Date | Payee name | |
| 07/02/2024 | Lindemann, Matthew | |
| Amount (\$) | Payee address; City; State; Zip Co | ode |
| \$250.00 | PO Box 1213 | |
| | | |
| Expenditure from corporate funds | Georgetown, TX 78627 | |
| 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. |
| EXI ENDITORE | Candidate/Officeholder/Political Committee | Check if Austin, TX, officeholder living expense |
| | | campaign support |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sou | ight Office held |
| ' | | |
| Date | Payee name | |
| 07/03/2024 | Mailchimp | |
| Amount (\$) | Payee address; City; State; Zip Co | ode |
| \$13.86 | 675 Ponce de Leon Ave NE Suite 5000 | |
| | | |
| Expenditure from corporate funds | Atlanta, GA 30308 | |
| 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. |
| EXI ENDITORE | | Check if Austin, TX, officeholder living expense |
| | | advertising |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sou | ight Office held |
| experience to belief 6/01 | • | |
| | | |

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
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: 10/17 Rpt: 59/66 | Leander Area Republican Women 00085167 |
| 4 Date | 5 Payee name |
| 07/25/2024 | Maynard, Tom |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$2,000.00 | PO Box 625 |
| Expenditure from | |
| corporate funds | Florence, TX 76527 |
| 8 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 |
| | campaign support |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 07/25/2024 | Minuteman Press |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$81.19 | 715 Discovery Blvd #401 |
| Ψ01.10 | TIO DISCOVERY DIVE HAVE |
| Expenditure from corporate funds | Cedar Park, TX 78613 |
| 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 |
| | printing |
| 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 |
| 08/13/2024 | Minuteman Press |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$27.06 | 715 Discovery Blvd #401 |
| | |
| Expenditure from corporate funds | Cedar Park, TX 78613 |
| 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 printing |
| | printing |
| Complete CNU V if all | Condidate/Officeholder name Office sought |
| 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)

Expense Event Expense Loan Repayment/Reimbu

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

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

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

| Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 11/17 Rpt: 60/66 | Leander Area Republican Women 00085167 |
| 4 Date | 5 Payee name |
| 08/21/2024 | Office Depot |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$103.91 | 1105 C-Bar Ranch Trl |
| Expenditure from | Coder Dark, TV 70012 |
| corporate funds | Cedar Park, TX 78613 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | printing |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | 1 |
| Date | Payee name |
| 07/01/2024 | Parker, Gina |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$250.00 | 5015 Fort Ave. |
| | |
| Expenditure from corporate funds | Waco, TX 76710 |
| 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 |
| | ταπραίχη συρμοίτ |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| Date | Payee name |
| 09/25/2024 | PrintRunner |
| | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$232.20 | 8000 Haskell Ave. |
| Expenditure from corporate funds | Van Nuys, CA 91406 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Event Expense Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | printing |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experience to belief 6/01 | • |
| | |
| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to complete this form. | |
|---|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | _ |
| Sch: 12/17 Rpt: 61/66 | Leander Area Republican Women 00085167 | |
| 4 Date | 5 Payee name | |
| 08/08/2024 | Reunion Ranch | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | _ |
| \$1,000.00 | 850 CR 255 | |
| | | |
| Expenditure from corporate funds | Georgetown, TX 78633 | |
| 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 event | |
| | CVCIII | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | _ |
| expenditure to benefit C/O | | |
| | | _ |
| Date | Payee name | |
| 09/10/2024 | Reunion Ranch | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$1,000.00 | 850 CR 255 | |
| Evpanditura from | | |
| Expenditure from corporate funds | Georgetown, TX 78633 | |
| 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 event | |
| | overit. | |
| Complete <u>ONLY</u> if direct | Candidate/Officeholder name Office sought Office held | _ |
| expenditure to benefit C/O | o | |
| | | _ |
| Date | Payee name | |
| 08/27/2024 | Saulo Cooper Catering | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$609.00 | 3911 Winchester Drive | |
| Expenditure from | | |
| corporate funds | Cedar Park, TX 78613 | |
| 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. | |
| EXPENDITORE | Check if Austin, TX, officeholder living expense | |
| | catering | |
| | | _ |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held | |
| | | |
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| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment The Instruction Guide explains how to complete this form. | | | | |
|--|--|--|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) | | |
| Sch: 13/17 Rpt: 62/66 | Leander Area Republican Women | 00085167 | | |
| 4 Date | 5 Payee name | • | | |
| 07/08/2024 | Square | | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | | | |
| \$30.91 | 1455 Market Street Suite 600 | | | |
| Expenditure from | | | | |
| corporate funds | San Francisco, CA 94103 | | | |
| 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 fees | | |
| | | 1000 | | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held | | |
| expenditure to benefit C/O | | | | |
| Date | Payee name | | | |
| 09/24/2024 | Square | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | |
| \$6.60 | 1455 Market Street Suite 600 | | | |
| | | | | |
| Expenditure from corporate funds | San Francisco, CA 94103 | | | |
| PURPOSE OF | , | Description | | |
| EXPENDITURE | Fees | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | |
| | | fees | | |
| | | | | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held | | |
| expenditure to benefit C/OI | 1 | | | |
| Date | Payee name | | | |
| 09/09/2024 | Square | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | |
| \$30.91 | 1455 Market Street Suite 600 | | | |
| Expenditure from | | | | |
| corporate funds | San Francisco, CA 94103 | | | |
| 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 | | |
| | | website | | |
| | | | | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held | | |
| expenditure to benefit C/O | 1 | | | |
| | | | | |
| | | | | |
| | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| Credit Card Payment | The Instruction Guide explains how to complete this form. | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 14/17 Rpt: 63/66 | 2 FILER NAME Leander Area Republican Women 3 Filer ID (Ethics Commission Filers) 00085167 | |
| 4 Date 07/25/2024 | 5 Payee name TFRW | |
| 6 Amount (\$) \$101.20 | 7 Payee address; City; State; Zip Code PO Box 171146 | |
| Expenditure from corporate funds | Austin, TX 78717-0041 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fees | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held | |
| Date 09/23/2024 | Payee name TFRW | |
| Amount (\$) \$250.00 | Payee address; City; State; Zip Code PO Box 171146 | |
| Expenditure from corporate funds | Austin, TX 78717-0041 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fees | |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held H | |
| Date 09/03/2024 | Payee name TFRW | |
| Amount (\$) \$126.50 | Payee address; City; State; Zip Code PO Box 171146 | |
| Expenditure from corporate funds | Austin, TX 78717-0041 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fees | |
| 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 Contributions/ Donations Made By -Candidate/Officeholder/Political Commi

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

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

| Candidate/Officeholder/Politica Credit Card Payment | Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 15/17 Rpt: 64/66 | Leander Area Republican Women 00085167 |
| 4 Date | 5 Payee name |
| 09/03/2024 | TFRW |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$166.67 | PO Box 171146 |
| | |
| Expenditure from corporate funds | Austin, TX 78717-0041 |
| 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 fees |
| | 1003 |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | - · · · · · · · · · · · · · · · · · · · |
| | |
| Date | Payee name |
| 07/01/2024 | Walmart |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$108.21 | 201 Walton Way |
| | |
| Expenditure from corporate funds | Cedar Park, TX 78613 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Event Expense |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | decorations |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experiorure to benefit C/O | |
| Date | Payee name |
| 08/06/2024 | mailchimp |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$13.86 | 675 Ponce de Leon Ave NE Suite 5000 |
| ,==:00 | |
| Expenditure from | Atlanta, GA 30308 |
| corporate funds | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Tayon Complete Schedule T |
| EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | advertising |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/Ol | |
| | |
| | |
| | |

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: 16/17 Rpt: 65/66 | Leander Area Republican Women 00085167 |
| 4 Date | 5 Payee name |
| 09/03/2024 | mailchimp |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$13.86 | 675 Ponce de Leon Ave NE Suite 5000 |
| | |
| Expenditure from corporate funds | Atlanta, GA 30308 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | advertising |
| | advertioning |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| Data | |
| Date | Payee name |
| 08/27/2024 | square |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$8.89 | 1455 Market Street Suite 600 |
| Evnanditura from | |
| Expenditure from corporate funds | San Francisco, CA 94103 |
| 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. |
| LAI LADITORE | Check if Austin, TX, officeholder living expense |
| | fees |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experientare to benefit ever | |
| Date | Payee name |
| 08/22/2024 | square |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$0.89 | 1455 Market Street Suite 600 |
| | |
| Expenditure from corporate funds | San Francisco, CA 94103 |
| 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 |
| | fees |
| 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 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

| | Contributings/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. | |
|---|--|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | , |
| | Sch: 17/17 Rpt: 66/66 | Leander Area Republican Women 00085167 | |
| 4 | Date | 5 Payee name | |
| | 08/07/2024 | square | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | |
| | \$30.91 | 1455 Market Street Suite 600 | |
| | Expenditure from corporate funds | San Francisco, CA 94103 | |
| 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. | |
| | LAI LINDITORL | Check if Austin, TX, officeholder living expense | |
| | | website | |
| | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held H | |
| | | | |