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) 00083190 3 COMMITTEE NAME **OFFICE USE ONLY** San Angelo Republican Women Date Received **ELECTRONICALLY FILED** 10/28/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO BOX 62472 Date Hand-delivered or Date Postmarked Change of Address San Angelo, TX 76906 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Guadalupe NAME NICKNAME LAST **SUFFIX** Gomez STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 3825 Tridens Trl. STREET **ADDRESS** (Residence or Business) San Angelo, TX 76904 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 3825 Tridens Trl. MAILING **ADDRESS** San Angelo, TX 76904 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (325) 227-5730 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 09/27/2024 10/26/2024 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

2 COMMITTEE NAME					(Ethics Commission Filers)
San Angelo Republican	Women			000831	.90
4 COMMITTEE ACTIVITY	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)	"			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
E CONTRIBUTION	1 TOTAL LINUTENIZE	D DOLUTICAL COA	ITDIDITIONS (OTLIED THAN		
.5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M × check here if this report	OR GUARANTEE MADE ELECTRON	ICALLY)	\$	0.00
	2. TOTAL POLITICA			\$	0.00
	(OTHER THAN PLE	EDGES, LOANS, C	OR GUARANTEES OF LOANS)	ľ	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXP	ENDITURES	\$	196.71
	4. TOTAL POLITICA	AL EXPENDITUR	RES	\$	939.30
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			DAY \$	2,488.10
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			THE \$	0.00
.6 AFFIDAVIT				<u> </u>	
		true	wear, or affirm, under penalty of pe e and correct and includes all info ler Title 15, Election Code.		
			Constal		
			Signature of Ca	ipe Gomez	
			Signature of Ca	шираци пе	ผวนเษา
AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed	before me, by the said		,1	this the	day
of	_, 20, to certify \	which, witness my	hand and seal of office.		
Signature of officer add	ministering oath	Printed name of o	fficer administering oath	Title of	officer administering oath

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

					3 of 5
17 COMMITTEE NAME 18 Filer ID				(Ethics Comm	ission Filers)
San Angelo Republican Women 00083190					
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOT	AL AMOUNT	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			0.00
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS			0.00
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION			
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	939.30
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

PLEI	DGED CONTRIBU	TIONS				SCHEDULE B
The Instruction Guide explains how to complete this form.				1	Total pages Sche Sch: 1/1 Rpt: 4	
2 FILER NAME San Angelo Republican Women			3	Filer ID (Ethics Commission Filers) 00083190		
1	OF UNITEMIZED PLEDO	GES			\$	0.00
5 Date	6 Full name of pledgor	out-of-state PAC (ID#	:) 8	Amount of pledge (\$)	9 In-kind description (If applicable)
	7 Pledgor Address;	City; State; Zip Code	9			
			La	[side of Texas. Complete Schedule T.
10 Principal	l occupation / Job title (See Instru	uctions)	11 Employer (See Inst	tructi	ons)	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schedule F1: Sch: 1/1 Rpt: 5/5	2 FILER NAME San Angelo Republican Women 3 Filer ID (Ethics Commission Filer 00083190		
4 Date 09/27/2024 6 Amount (\$)	5 Payee name Tom Green County Republican Party 7 Payee address; City; State; Zip Code		
\$400.00	2525 Johnson St., Ste. A		
corporate funds	San Angelo, TX 76904		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense DONATION		
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date 09/27/2024	Payee name WEEBLY		
Amount (\$) \$342.59	Payee address; City; State; Zip Code 460 BRYANT ST.		
Expenditure from corporate funds	SAN FRANCISCO, TX 94111		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) WEBSITE HOSTING (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense WEBSITE HOSTING & DOMAIN		
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		