

# MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC  
COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00088607	2 Total pages filed: 9				
3 COMMITTEE NAME Red Stiletto Republican Women			<b>OFFICE USE ONLY</b>				
			Date Received ELECTRONICALLY FILED 11/04/2024				
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 120 Seth Raynor Drive  New Braunfels, TX 78130		Date Hand-delivered or Date Postmarked				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Minerva	MI MI	Receipt #      Amount			
	NICKNAME	LAST Cuvillier	SUFFIX	Date Processed			
				Date Imaged			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5885 Barbarossa Road  Seguin, TX 78155						
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 5885 Barbarossa Road  Seguin, TX 78155						
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(830)	556-9200					
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)						
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input checked="" type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5						
11 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	09	26	2024		10	25	2024

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# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Red Stiletto Republican Women	<b>13 Filer ID</b> (Ethics Commission Filers) 00088607
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b>	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$ 865.00
<b>EXPENDITURE TOTALS</b>	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 0.00
<b>CONTRIBUTION BALANCE</b>	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 613.75
<b>OUTSTANDING LOAN TOTALS</b>	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**16 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Ms. Minerva Cuvillier  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - MPAC

<b>17 COMMITTEE NAME</b> Red Stiletto Republican Women		<b>18 Filer ID</b> (Ethics Commission Filers) 00088607
<b>19 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 865.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,428.24
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/9
2 FILER NAME Red Stiletto Republican Women		3 Filer ID (Ethics Commission Filers) 00088607
4 Date 10/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atzger, Deloris (Mrs.)	7 Amount of Contribution (\$)  \$50.00
	6 Contributor address; City; State; Zip Code  Seguin, TX 78155	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, James (Mr.)	Amount of Contribution (\$)  \$35.00
	Contributor address; City; State; Zip Code  Seguin, TX 78156	
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colgate, Kaitlin (Ms.)	Amount of Contribution (\$)  \$265.00
	Contributor address; City; State; Zip Code  New Braunfels, TX 78130	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Konen, Mark (Mr.)	Amount of Contribution (\$)  \$35.00
	Contributor address; City; State; Zip Code  New Braunfels, TX 78132	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krohn, Christie (Mrs.)	Amount of Contribution (\$)  \$20.00
	Contributor address; City; State; Zip Code  Seguin, TX 78155	
Principal occupation / Job title (See Instructions) Broker Carpet Direct		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/3 Rpt: 5/9
<b>2</b> FILER NAME Red Stiletto Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00088607
<b>4</b> Date 10/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Krohn, Kristopher (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Seguin, TX 78155	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Home Builder		<b>9</b> Employer (See Instructions)
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Republican Club of Comal County <hr/> Contributor address; City; State; Zip Code  New Braunfels, TX 78131	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rohach, Stefan (Mr.) <hr/> Contributor address; City; State; Zip Code  Seguin, TX 78155	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roharch, Raechel (Mrs.) <hr/> Contributor address; City; State; Zip Code  Seguin, TX 78155	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Self-employed		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schott, Debra (Mrs.) <hr/> Contributor address; City; State; Zip Code  New Braunfels, TX 78130	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/3 Rpt: 6/9
<b>2</b> FILER NAME Red Stiletto Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00088607
<b>4</b> Date 10/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Acker, Thomas (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  LULING, TX 78648	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions)

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/3 Rpt: 7/9		2 FILER NAME Red Stiletto Republican Women		3 Filer ID (Ethics Commission Filers) 00088607	
4 Date 10/24/2024		5 Payee name Amazon			
6 Amount (\$)  112.43 <input type="checkbox"/> Expenditure from corporate funds		7 Payee Address; City; State; Zip  TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Event Expense		(b) Description (See instructions regarding type of information required.) Expense for watch party	
Date 10/25/2024		Payee name Amazon			
Amount (\$)  17.28 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip  TX			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Event Expense		(b) Description (See instructions regarding type of information required.) Party supplies	
Date 10/25/2024		Payee name Amazon			
Amount (\$)  33.80 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip  TX			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Event Expense		(b) Description (See instructions regarding type of information required.) Party supplies	
Date 10/25/2024		Payee name Amazon			
Amount (\$)  16.23 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip  TX			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Event Expense		(b) Description (See instructions regarding type of information required.) Party supplies	

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/3 Rpt: 8/9	2 FILER NAME Red Stiletto Republican Women	3 Filer ID (Ethics Commission Filers) 00088607
4 Date 09/29/2024	5 Payee name GoDaddy	
6 Amount (\$)  18.11 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip  TX	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Website	(b) Description (See instructions regarding type of information required.) Website
Date 10/06/2024	Payee name Jotform, Inc.	
Amount (\$)  42.12 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip  TX	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Subscription	(b) Description (See instructions regarding type of information required.) Subscription
Date 10/18/2024	Payee name Project Broadcast	
Amount (\$)  23.45 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip  TX	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Subscription	(b) Description (See instructions regarding type of information required.) Subscription
Date 10/24/2024	Payee name Texas Federation of Republican Women	
Amount (\$)  450.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 N. Hwy 183, Suite J4  Austin, TX 78750	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Additional members



# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/3 Rpt: 9/9	2 FILER NAME Red Stiletto Republican Women	3 Filer ID (Ethics Commission Filers) 00088607
4 Date 10/12/2024	5 Payee name The Bandit	
6 Amount (\$)  309.58 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 6019 FM 725  New Braunfels, TX 78130	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Coffee, water, tea
Date 10/10/2024	Payee name Ultimate Burger	
Amount (\$)  405.24 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 840 South Elliott Knox  New Braunfels, TX 78130	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Catering