FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00017039 3 COMMITTEE NAME **OFFICE USE ONLY** Concho Valley Republican Women's Club PAC Date Received **ELECTRONICALLY FILED** 12/30/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 60583 Change of Address San Angelo, TX 76906 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mrs. Teri NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Jackson CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1515 Grierson Street STREET **ADDRESS** (Residence or Business) San Angelo, TX 76901 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 1515 Grierson Street MAILING **ADDRESS** Change of Address San Angelo, TX 76901 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (325) 656-0121 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY X January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 11/26/2024 12/25/2024

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer	•	Filers)
Concho Valley Repu	blican Women's Club PA	C	0001	.7039	
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	A. Supported			
	of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
5 CONTRIBUTION		D POLITICAL CONTRIBUTIONS (OTHER THAI	N		
TOTALS		OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)		\$	0.00
		qualifies for the higher itemization threshold			
		AL CONTRIBUTIONS		\$ 3	,160.92
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS	S)		,100.02
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES		\$ 2	,215.00
CONTRIBUTION	- FOTAL POLITICAL	CONTRIBUTIONS MAINTAINED AS OF THE	ACT DAY		
CONTRIBUTION BALANCE	OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE L G PERIOD	AST DAY	\$ 20	,983.73
OUTSTANDING LOAN TOTALS	l l	AMOUNT OF ALL OUTSTANDING LOANS AS REPORTING PERIOD	OF THE	\$	0.00
6 AFFIDAVIT			<u> </u>		
		I swear, or affirm, under penalty of true and correct and includes all under Title 15, Election Code.	of perjury, tha information re	nt the accompanying report equired to be reported by m	is e
		Mro	. Teri Jackso	20	
			of Campaign T		
		Signature o	n Campaign i	rreasurer	
AFFIX NOTA	RY STAMP / SEAL ABOVE				
Sworn to and subscrib	ped before me, by the said _		, this the	day	
		which, witness my hand and seal of office.	_		
Signature of officer	administering oath	Printed name of officer administering oath	Title	of officer administering oath	n

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

3 of 8					3 of 8
17 CO	MMITTE	E NAME	18 Filer ID	(Ethics Commissio	n Filers)
l co	ncho V	alley Republican Women's Club PAC	00017039	`	,
<u> </u>					
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE					MOUNT
NAME OF SCHEDULE					
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	3,160.92
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR 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.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	2,215.00
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 TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to com	plete this form	n.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/8	
2	FILER NAME Concho Valle	ey Republican Women's Club PAC			3	Filer ID (Ethics Commission 00017039	on Filers)
4	Date 12/13/2024	 Full name of contributor out-of- August Pfluger for Congress Contributor address; City; State; Zip Congress)	7	Amount of Contribution (\$)	\$1,000.00
		San Angelo, TX 76902					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-Harrison, Sande (Mrs.) Contributor address; City; State; Zip Contributor				Amount of Contribution (\$)	\$35.00
	Principal occu	San Angelo, TX 76904 pation / Job title (See Instructions)		Employer (See Instructions)		
	Retired	(======================================			,		
	Date 12/13/2024	Full name of contributor out-of- Lassetter, Ellen Contributor address; City; State; Zip Co	state PAC (ID#: ode			Amount of Contribution (\$)	\$75.00
		San Angelo, TX 76904					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/17/2024	Thomason, Craig				Amount of Contribution (\$)	\$15.92
	Principal occu Police Office	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/13/2024	Turner, Judy (Mrs.))		Amount of Contribution (\$)	\$2,000.00
	Principal occu Rancher	oation / Job title (See Instructions)		Employer (See Instructions)		
			1				

	MONETARY POLITICAL CONTRIBUTIONS			s	SCHEDULE A1
	The Instruction Guide explains how to complete this form.			1 Total pages Scho Sch: 2/2 Rpt: 5	
2	FILER NAME	ley Republican Women's Club PAC		3 Filer ID (Ethics 00017039	Commission Filers)
4	Date 12/13/2024	Date 5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contri	sibution (\$) \$35.00
8	Principal occu	Miles, TX 76861 upation / Job title (See Instructions)	9 Employer (See Instructions	us)	
	Judge Preci	nct 1	Tom Green County		

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

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: 1/3 Rpt: 6/8	Concho Valley Republican Women's Club PAC 00017039
4 Date	5 Payee name
12/03/2024	Angelo Awards
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$124.49	1605 W Ave N
Expenditure from	041
corporate funds	San Angelo, TX 76904
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
	Naturilization Ceremonies
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
12/20/2024	Constant Contact
Amount (\$)	Payee address; City; State; Zip Code
\$24.52	Reservoir Place
	1601 Trapelo Road
Expenditure from corporate funds	Waltham, MA 02451
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Monthly Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/03/2024	Jenike, Karen (Mrs.)
Amount (\$)	
\$15.61	Payee address; City; State; Zip Code 5214 Beverly Drive
\$15.01	5214 Beverly Drive
Expenditure from corporate funds	San Angelo, TX 76904
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
EAPENDITURE	Check if Austin, TX, officeholder living expense
	State of Texas Education Board
Commission Chill V M alia	Condidate/Officeholder name Office county
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/3 Rpt: 7/8	Concho Valley Republican Women's Club PAC 00017039
4 Date	5 Payee name
12/03/2024	Martin, Linda (Mrs.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$453.41	2650 Harvard Ave
Expenditure from corporate funds	San Angelo, TX 76904
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Hotel & Food. State Board of Education
	Hotel & Food. State Board of Education
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit Gree	
Date	Payee name
12/23/2024	Shelburne, LaQueta (Mrs.)
Amount (\$)	Payee address; City; State; Zip Code
\$420.00	3177 Executive Dr
+ ·= · · · ·	CITY EXCOUNTS 5.
Expenditure from corporate funds	San Angelo, TX 76903
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
L/II LIIDII GI.	Check if Austin, TX, officeholder living expense
	Officers and Special Guests
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	п
Date	Payee name
12/23/2024	Shelburne, LaQueta (Mrs.)
Amount (\$)	Payee address; City; State; Zip Code
\$638.16	3177 Executive Dr
φ030.10	STIT Executive Di
Expenditure from	
corporate funds	San Angelo, TX 76903
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Auction Items
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H .

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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 Legal Services 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
Travel Out of District
Travel Out of District

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: 3/3 Rpt: 8/8	Concho Valley Republican Women's Club PAC 00017039
4 Date	5 Payee name
12/03/2024	Turner, Judy
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	PO Drawer 231
Expenditure from corporate funds	San Angelo, TX 76902
8 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 Cash for Auction Gift
	Cash for Adolfor One
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Candidate/Oniceriolder name Onice sought Onice neid
Date	Payee name
12/13/2024	Vonage
Amount (\$)	Payee address; City; State; Zip Code
\$38.81	23 Main Street
Expenditure from corporate funds	Horndel, NJ 07733
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Monthly Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1