

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00080865	2 Total pages filed: 57
3 COMMITTEE NAME Liberty Belles Republican Women		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 01/15/2025	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 1081 Conroe, TX 77305	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Ms. Portia K.	
		NICKNAME LAST SUFFIX Brown	
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 13982 East FM 1097 Rd. Willis, TX 77378	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 13982 East FM 1097 Rd. Willis, TX 77378	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (281) 300-9983	
9 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff	
10 PERIOD COVERED		Month Day Year Month Day Year 07/01/2024 THROUGH 12/31/2024	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Liberty Belles Republican Women	13 Filer ID (Ethics Commission Filers) 00080865
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. 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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,077.50
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 14,250.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 68,282.01
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 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. Portia K. Brown

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 - GPAC

17 COMMITTEE NAME Liberty Belles Republican Women		18 Filer ID (Ethics Commission Filers) 00080865
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,077.50
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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 14,250.00
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	\$ 8,383.28
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/37 Rpt: 4/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apostolo, Sandy <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apostolo, Sandy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apostolo, Sandy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apostolo, Sandy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Backen, Carolyn <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/37 Rpt: 5/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Backen, Carolyn <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Backen, Carolyn <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Backen, Carolyn <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Backen, Carolyn <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balzola, Cynthia <hr/> Contributor address; City; State; Zip Code Willis, TX 77379	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) retired nurse		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/37 Rpt: 6/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balzola, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77379	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) retired nurse		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baradaran, Shiva <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Admin Aide		Employer (See Instructions) Sen Brandon Creighton
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bays, Kristin (Judge) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) District Judge		Employer (See Instructions) Self
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belin, Charlotte <hr/> Contributor address; City; State; Zip Code Panorama Village, TX 77305	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired - Teacher		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belin, Charlotte <hr/> Contributor address; City; State; Zip Code Panorama Village, TX 77305	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired - Teacher		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/37 Rpt: 7/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belin, Charlotte <hr/> 6 Contributor address; City; State; Zip Code Panorama Village, TX 77305	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Retired - Teacher		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belin, Charlotte <hr/> Contributor address; City; State; Zip Code Panorama Village, TX 77305	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired - Teacher		Employer (See Instructions)
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bender, Gina <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bender, Gina <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bender, Gina <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/37 Rpt: 8/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bender, Gina <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77384	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bender, Gina <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bilby, Christopher <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bilby, Lois <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bilby, Lois <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/37 Rpt: 9/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bilby, Lois <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77318	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bott, Janet <hr/> Contributor address; City; State; Zip Code Conore, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bott, Janet <hr/> Contributor address; City; State; Zip Code Conore, TX 77304	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Portia <hr/> Contributor address; City; State; Zip Code Willis, TX 77378	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Portia <hr/> Contributor address; City; State; Zip Code Willis, TX 77378	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/37 Rpt: 10/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bybee, Kristin (Calfee)	7 Amount of Contribution (\$) \$36.50
	6 Contributor address; City; State; Zip Code Conroe, TX 77301	
8 Principal occupation / Job title (See Instructions) Payments Advisor		9 Employer (See Instructions) Woodforest National Bank
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cappadonna, Jo Ann	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Conroe, TX 77304	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cappadonna, Jo Ann	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Conroe, TX 77304	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cappadonna, Jo Ann	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Conroe, TX 77304	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cappadonna, Jo Ann	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Conroe, TX 77304	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/37 Rpt: 11/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cappadonna, Jo Ann	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Conroe, TX 77304		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cappadonna, Jo Ann	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cash for Constable, Philip	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Willis, TX 77318		
Principal occupation / Job title (See Instructions) Constable		Employer (See Instructions) Montgomery County
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Kenneth	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Willis, TX 77378		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Kenneth (The Honorable)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Willis, TX 77378		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/37 Rpt: 12/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Kenneth (The Honorable)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Willis, TX 77378	
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions)
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Kenneth (The Honorable)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Willis, TX 77378	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Marisa	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code Willis, TX 77378	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Marisa	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code Willis, TX 77378	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christ, Kristin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Magnolia, TX 77355	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Southern Heritage Consulting

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/37 Rpt: 13/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clayton, Marva	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code Conroe, TX 77303		
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clayton, Marva	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Conroe, TX 77303		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collings, Elaine	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Montgomery, TX 77356		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowe, Mary Jane	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Willis, TX 77318		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowe, Mary Jane	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Willis, TX 77318		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/37 Rpt: 14/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowe, Mary Jane	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Willis, TX 77318	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowe, Mary Jane	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Willis, TX 77318	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowe, Mary Jane	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Willis, TX 77318	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Divilbiss, Mary Lu	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code conroe, TX 77304	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Divilbiss, Mary Lu	Amount of Contribution (\$) \$55.00
	Contributor address; City; State; Zip Code Conroe, TX 77304	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/37 Rpt: 15/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Divilbiss, Mary Lu	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Conroe, TX 77304	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Divilbiss, Mary Lu	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Conroe, TX 77304	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Divilbiss, Mary Lu	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Conroe, TX 77304	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobbs, Betty	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Conroe, TX 77304	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doolittle, Sherry	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Montgomery, TX 77316	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/37 Rpt: 16/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dukes, Shirley	7 Amount of Contribution (\$) \$36.50
6 Contributor address; City; State; Zip Code Conroe, TX 77301		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dukes, Shirley	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Conroe, TX 77301		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Embody, Pamela	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Montgomery, TX 77316		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Embody, Pamela	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Montgomery, TX 77316		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Embody, Pamela	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Montgomery, TX 77316		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/37 Rpt: 17/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Embody, Pamela <hr/> 6 Contributor address; City; State; Zip Code Montgomery, TX 77316	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Ruth <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77318	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Ruth <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77318	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faubel, Julie <hr/> Contributor address; City; State; Zip Code Montgomery , TX 77356	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Texas Federation Republican Women		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faubel, Julie <hr/> Contributor address; City; State; Zip Code Montgomery , TX 77356	Amount of Contribution (\$) \$26.50
Principal occupation / Job title (See Instructions) Texas Federation Republican Women		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/37 Rpt: 18/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faubel, Julie	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Montgomery , TX 77356	
8 Principal occupation / Job title (See Instructions) Texas Federation Republican Women		9 Employer (See Instructions)
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia , Debbie	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Conroe, TX 77304	
Principal occupation / Job title (See Instructions) Home Health		Employer (See Instructions)
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Tara	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Conroe, TX 77304	
Principal occupation / Job title (See Instructions) Campaign Manager		Employer (See Instructions) Sen. Brandon Creighton
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Tara	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Conroe, TX 77304	
Principal occupation / Job title (See Instructions) Campaign Manager		Employer (See Instructions) Sen. Brandon Creighton
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goleman, Scott	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Conroe, TX 77306	
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/37 Rpt: 19/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grace, Charline <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Velinda <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greathouse, Anna <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, B D (The Honorable) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) County Attorney		Employer (See Instructions) Montgomery County
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hafley, John (The Honorable) <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77355	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/37 Rpt: 20/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haines, Martha	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code Conroe, TX 77301		
8 Principal occupation / Job title (See Instructions) Retired R.N.		9 Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Stephanie	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Spring, TX 77386		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Stephanie	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Spring, TX 77386		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Stephanie	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Spring, TX 77386		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Stephanie	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Spring, TX 77386		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/37 Rpt: 21/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herder, Amanda <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77057	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Westmont Hospitality Group, Inc.
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hivnor, M. Diane <hr/> Contributor address; City; State; Zip Code Willis, TX 77378	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogan, Joanne <hr/> Contributor address; City; State; Zip Code Rocky Point, NY 11778	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogan, Joanne <hr/> Contributor address; City; State; Zip Code Rocky Point, NY 11778	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutson, Echo (The Honorable) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/37 Rpt: 22/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 08/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inman, Kelly	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Conroe, TX 77304		
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Frances (Gay)	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Conroe, TX 77303		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Frances (Gay)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Conroe, TX 77303		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kellum, Stacy	Amount of Contribution (\$) \$36.50
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Medical Billing Specialist		Employer (See Instructions)
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kercheval, Patricia	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Willis, TX 77378		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/37 Rpt: 23/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keyser, Patsy	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Conroe, TX 77304		
8 Principal occupation / Job title (See Instructions) Retired Teacher		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keyser, Patsy	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keyser, Patsy	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keyser, Patsy	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Kim	Amount of Contribution (\$) \$95.00
Contributor address; City; State; Zip Code Panorama Village, TX 77304-1132		
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/37 Rpt: 24/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Kim <hr/> 6 Contributor address; City; State; Zip Code Panorama Village, TX 77304-1132	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Retired Educator		9 Employer (See Instructions)
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kobarg, Richard <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kobarg, Richard <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kobarg, Richard <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kobarg, Richard <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/37 Rpt: 25/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kobarg, Richard <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Raquel <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lonon, Karen <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lonon, Karen <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luecke, Ann <hr/> Contributor address; City; State; Zip Code conroe, TX 77304	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/37 Rpt: 26/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luecke, Ann <hr/> 6 Contributor address; City; State; Zip Code conroe, TX 77304	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lundy, Sandy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lundy, Sandy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Caroline <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGrath, Ruthie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/37 Rpt: 27/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGrath, Ruthie <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGrath, Ruthie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGrath, Ruthie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meder, Sue <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millsaps, Hayley <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Legislative Staff		Employer (See Instructions) Texas House

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/37 Rpt: 28/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modeland, Vicki <hr/> 6 Contributor address; City; State; Zip Code Conr, TX 77304	7 Amount of Contribution (\$) \$55.00
8 Principal occupation / Job title (See Instructions) Nurse Practitioner		9 Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Bonnie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Bonnie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Bonnie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman Neil Eddleman & Barbara B. Neil Eddleman,, TTE <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/37 Rpt: 29/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olszowy, Sylvia <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77318	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olszowy, Sylvia <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olszowy, Sylvia <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olszowy, Sylvia <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olszowy, Sylvia <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/37 Rpt: 30/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jean <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77318	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jean <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jean <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sargent, Bernie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Historian		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sargent, Bernie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Historian		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/37 Rpt: 31/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sargent, Melissa <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$55.00
8 Principal occupation / Job title (See Instructions) Merchandizer		9 Employer (See Instructions)
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staat, Julie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77302	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Bank Officer		Employer (See Instructions)
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staat, Julie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77302	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) Bank Officer		Employer (See Instructions)
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staat, Julie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77302	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Bank Officer		Employer (See Instructions)
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stavinoha, Elizabeth <hr/> Contributor address; City; State; Zip Code Mon, TX 77356	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Kstar

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/37 Rpt: 32/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steinmann, Brandon	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Conroe, TX 77304		
8 Principal occupation / Job title (See Instructions) Montgomery County Clerk		9 Employer (See Instructions)
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TFRW	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Austin, TX 78750		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Judi	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Conroe, TX 77303		
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions)
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Judi	Amount of Contribution (\$) \$36.50
Contributor address; City; State; Zip Code Conroe, TX 77303		
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Judi	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Conroe, TX 77303		
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/37 Rpt: 33/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Judi	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Conroe, TX 77303	
8 Principal occupation / Job title (See Instructions) Retired Educator		9 Employer (See Instructions)
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Judi	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Conroe, TX 77303	
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Judi	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Conroe, TX 77303	
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Janet	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Willis, TX 77318	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Janet	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Willis, TX 77318	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/37 Rpt: 34/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Janet <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77318	7 Amount of Contribution (\$) \$56.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Janet <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillman, Sarah <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) district director		Employer (See Instructions) rep. will metcalf
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillman, Sarah <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) district director		Employer (See Instructions) rep. will metcalf
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toth, Steve (Rep.) <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/37 Rpt: 35/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underdown, Marie <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underdown, Marie <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagers Smith, Mary <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagers Smith, Mary <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagers Smith, Mary <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/37 Rpt: 36/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagers Smith, Mary <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Robert <hr/> Contributor address; City; State; Zip Code Willis, TX 77378	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Feed Store Owner		Employer (See Instructions) Self
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weems, Aurelia <hr/> Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weems, Aurelia <hr/> Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of Contribution (\$) \$36.50
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westlake, Janet <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/37 Rpt: 37/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westlake, Janet <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77318	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Real Estate Agent		9 Employer (See Instructions)
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westlake, Janet <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westlake, Janet <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiesner, Cindy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiesner, Cindy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/37 Rpt: 38/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiesner, Cindy <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiesner, Cindy <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Jane <hr/> Contributor address; City; State; Zip Code Panorama Village, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Jane <hr/> Contributor address; City; State; Zip Code Panorama Village, TX 77304	Amount of Contribution (\$) \$56.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Jane <hr/> Contributor address; City; State; Zip Code Panorama Village, TX 77304	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/37 Rpt: 39/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Jane	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Panorama Village, TX 77304		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Jane	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Panorama Village, TX 77304		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Jane	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Panorama Village, TX 77304		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jay	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Conroe, TX 77302		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jay	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Conroe, TX 77302		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/37 Rpt: 40/57
2 FILER NAME Liberty Belles Republican Women		3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jay	7 Amount of Contribution (\$) \$46.50
6 Contributor address; City; State; Zip Code Conroe, TX 77302		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jay	Amount of Contribution (\$) \$63.00
Contributor address; City; State; Zip Code Conroe, TX 77302		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jay	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Conroe, TX 77302		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyeth, Delfa	Amount of Contribution (\$) \$110.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarborough, Abby	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Housewife		Employer (See Instructions)

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
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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 41/57	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
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4 Date 10/10/2024	5 Payee name David Eason Campaign
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6 Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 12176 Twin Pine Road Conroe, TX 77303
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Donation
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/10/2024	Payee name Friends of B.D. Griffin
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Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 931 N. Rivershire Conroe, TX 77304
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Donation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/17/2024	Payee name Jennifer J. Robin Campaign
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Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 301 N. Main Ste. 210 Conroe, TX 77301
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Donation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/5 Rpt: 42/57	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
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4 Date 10/10/2024	5 Payee name Judge Patty Maginnis Campaign Account
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6 Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 302 Wilson Road C, TX 77301
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Donation
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/10/2024	Payee name Judge Wayne L. Mack Campaign
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 2234 Conroe, TX 77305
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Donation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/10/2024	Payee name Kent Chambers Campaign
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Amount (\$) \$1,200.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 502 W. Montgomery Box 551 Willis, TX 77378
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/5 Rpt: 43/57	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/10/2024	5 Payee name Philip Cash for Constable Campaign	
6 Amount (\$) \$1,200.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 2099 Willis, TX 77378	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/10/2024	Payee name Robert Walker Campaign	
Amount (\$) \$1,200.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13585 Walker Road Willis, TX 77378	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/10/2024	Payee name Steve Toth Campaign	
Amount (\$) \$1,200.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 67 Chestnut Meadow Drive Ste. 100 Conroe, TX 77384	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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: Sch: 4/5 Rpt: 44/57	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/10/2024	5 Payee name Tammy McRae Campaign	
6 Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 10 Capshaw Court C, TX 77385	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Donation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/10/2024	Candidate/Officeholder name Tracy A. Gilbert Campaign	
Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. Box 7114 The , TX 77387	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/10/2024	Candidate/Officeholder name Vince Santini Campaign	
Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought P O Box 558 Pinehurst, TX 77362	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/10/2024	Candidate/Officeholder name Vince Santini Campaign	
Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought P O Box 558 Pinehurst, TX 77362	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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
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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 45/57	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
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4 Date 10/10/2024	5 Payee name Wesley Doolittle for Sheriff Campaign
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6 Amount (\$) \$1,200.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6606 F.M. 1488 Ste. 148-638 Magnolia, TX 77354
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Donation
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/10/2024	Payee name Will Metcalf Campaign
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Amount (\$) \$6,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 454 Conroe, TX 77305
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/12 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/16/2024	5 Payee name 1&1 Mail & Media, Inc	
6 Amount (\$) 29.99 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 100 North 18th Street Ste. 400 Philadelphia, PA 19103	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Mail.com - Email service
Date 11/21/2024	Payee name Amazon	
Amount (\$) 216.62 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 410 Terry Ave. N. Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (See instructions regarding type of information required.) Clothing Donation to Veterans' Admin. Hospital
Date 11/22/2024	Payee name Amazon	
Amount (\$) 12.94 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 410 Terry Ave. N. Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) President's Gift
Date 12/16/2024	Payee name Amazon	
Amount (\$) 10.76 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 410 Terry Ave. N. Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) President's gift

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/12 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/19/2024	5 Payee name Amazon	
6 Amount (\$) 8.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 410 Terry Ave. N. Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Mardi Gras event
Date 12/12/2024	Payee name Apostolo, Sandy	
Amount (\$) 35.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 289 Appley Valley Drive Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) President's Gift - Book
Date 07/18/2024	Payee name Belin, Charlotte	
Amount (\$) 66.66 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 40 Cherry Hill Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Delegate Expense TFRW Reimbursement for TRP Convention
Date 07/18/2024	Payee name Bilby, Lois	
Amount (\$) 66.67 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 10142 Cude Cemetery Road Willis, TX 77318	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Delegate Expense TFRW Reimbursement for TRP Convention

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/12 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 09/12/2024	5 Payee name Bling Name Badges	
6 Amount (\$) 38.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 915 Bridge Street Winston Salem, NC 27101	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Merchandise	(b) Description (See instructions regarding type of information required.) Items for Resale
Date 10/23/2024	Payee name Bling Name Badges	
Amount (\$) 38.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 915 Bridge Street Winston Salem, NC 27101	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Member Badges	(b) Description (See instructions regarding type of information required.) Individual Badges for Members
Date 12/16/2024	Payee name HEB	
Amount (\$) 37.89 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 12350 IH-45 N. Willis, TX 77378	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) Flowers for President Gift
Date 09/12/2024	Payee name Haines, Martha	
Amount (\$) 20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1100 Kimberly Lane Conroe, TX 77301	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Refund	(b) Description (See instructions regarding type of information required.) Refund of duplicate payment

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 4/12 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 07/18/2024	5 Payee name Love Heals Youth	
6 Amount (\$) 500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 212 Conroe Drive Conroe, TX 77301	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) Donation
Date 07/18/2024	Payee name McGrath, Ruthie	
Amount (\$) 66.67 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 103 Hiwon Dr. Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Delegate Expense TFRW Reimbursement for TRP Convention
Date 12/19/2024	Payee name Minuteman Press	
Amount (\$) 196.71 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1201 N. Loop 336 W. Conroe, TX 77301	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Invitation printing for Mardi Gras event
Date 10/10/2024	Payee name Nelson, Bonnie	
Amount (\$) 19.81 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 147 Navajo Trail Panorama Village, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Office 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: 5/12 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/19/2024	5 Payee name Office Depot	
6 Amount (\$) 14.93 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1319 W. Davis Street Conroe, TX 77304	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Supplies for Mardi Gras Event
Date 09/12/2024	Payee name Panorama Golf Club	
Amount (\$) 740.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 73 Greenbriar Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Room and Meals for Monthly Meeting
Date 10/10/2024	Payee name Panorama Golf Club	
Amount (\$) 1,190.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 73 Greenbriar Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Meals and Room for Monthly Meeting
Date 11/14/2024	Payee name Panorama Golf Club	
Amount (\$) 812.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 73 Greenbriar Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Room and Meals for Monthly Meeting

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 6/12 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/12/2024	5 Payee name Panorama Golf Club	
6 Amount (\$) 1,212.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 73 Greenbriar Conroe, TX 77304	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Meals and Room for Monthly Meeting
Date 09/16/2024	Payee name Pay Pal	
Amount (\$) 30.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2211 N FIRST STREET SAN JOSE , CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) PayPal charges
Date 10/11/2024	Payee name Pay Pal	
Amount (\$) 35.17 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2211 N FIRST STREET SAN JOSE , CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) PayPal charges
Date 11/15/2024	Payee name Pay Pal	
Amount (\$) 34.70 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2211 N FIRST STREET SAN JOSE , CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) PayPal Charges

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 7/12 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 12/13/2024	5 Payee name Pay Pal	
6 Amount (\$) 41.26 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 2211 N FIRST STREET SAN JOSE , CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) PayPal Charges
Date 11/21/2024	Payee name Sam's Club	
Amount (\$) 70.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2000 Westview Blvd Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Halloween Candy
Date 07/18/2024	Payee name Table at Madeley	
Amount (\$) 227.32 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 316 Madeley Conroe, TX 77301	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Membership
Date 08/30/2024	Payee name Table at Madeley	
Amount (\$) 421.28 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 316 Madeley Conroe, TX 77301	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Membership Event

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 8/12 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/02/2024	5 Payee name Texas Comptroller	
6 Amount (\$) 4.04 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 111 E 17th Austin, TX 78774	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Taxes
Date 12/16/2024	Payee name Texas Comptroller	
Amount (\$) 13.99 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 111 East 17th Street Austin, TX 78774	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Taxes
Date 10/18/2024	Payee name Texas Federation of Republican Women	
Amount (\$) 50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 N. Hwy 183, Ste. J4 Austin, TX 78750-1832	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (See instructions regarding type of information required.) Donation
Date 11/07/2024	Payee name Texas Federation of Republican Women	
Amount (\$) 834.90 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 N. Hwy 183, Ste. J4 Austin, TX 78750-1832	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Membership Fees	(b) Description (See instructions regarding type of information required.) Membership Fees

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 9/12 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 11/18/2024	5 Payee name Texas Federation of Republican Women	
6 Amount (\$) 20.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 13740 N. Hwy 183, Ste. J4 Austin, TX 78750-1832	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Membership Fees	(b) Description (See instructions regarding type of information required.) Membership Fees
Date 11/21/2024	Payee name Texas Federation of Republican Women	
Amount (\$) 177.10 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 N. Hwy 183, Ste. J4 Austin, TX 78750-1832	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Membership Fees	(b) Description (See instructions regarding type of information required.) Membership Fees
Date 12/15/2024	Payee name Texas Federation of Republican Women	
Amount (\$) 177.10 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13740 N. Hwy 183, Ste. J4 Austin, TX 78750-1832	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Membership Fees	(b) Description (See instructions regarding type of information required.) Membership Fees
Date 12/19/2024	Payee name US Post Office	
Amount (\$) 101.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 809 W. Dallas St. Conroe, TX 77301-9999	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Postage for Mardi Gras event

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 10/12 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/13/2024	5 Payee name US Post Office	
6 Amount (\$) 29.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 809 W. Dallas St. Conroe, TX 77301-9999	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Postage
Date 08/30/2024	Payee name Williamson, Jane	
Amount (\$) 24.29 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 47 Cherry Hill Drive Panorama Village, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Membership Event
Date 09/09/2024	Payee name Williamson, Jane	
Amount (\$) 15.57 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 47 Cherry Hill Drive Panorama Village, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Office Supplies
Date 10/03/2024	Payee name Wix.com, Inc	
Amount (\$) 29.49 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 6701 Harwin Drive Ste. 105 Houston, TX 77036	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) website expense

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 11/12 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/21/2024	5 Payee name Wix.com, Inc	
6 Amount (\$) 220.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 6701 Harwin Drive Ste. 105 Houston, TX 77036	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Website hosting
Date 07/02/2024	Payee name Woodforest Acceptance Solutions	
Amount (\$) 60.95 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip P.O. Box 7889 The Woodlands, TX 77387	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Charge for card services
Date 08/02/2024	Payee name Woodforest Acceptance Solutions	
Amount (\$) 60.95 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip P.O. Box 7889 The Woodlands, TX 77387	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Credit Card Services
Date 09/04/2024	Payee name Woodforest Acceptance Solutions	
Amount (\$) 61.56 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip P.O. Box 7889 The Woodlands, TX 77387	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Credit Card Services

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 12/12 Rpt:	2 FILER NAME Liberty Belles Republican Women	3 Filer ID (Ethics Commission Filers) 00080865
4 Date 10/02/2024	5 Payee name Woodforest Acceptance Solutions	
6 Amount (\$) 61.98 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip P.O. Box 7889 The Woodlands, TX 77387	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Credit Card Services
Date 11/04/2024	Payee name Woodforest Acceptance Solutions	
Amount (\$) 122.81 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip P.O. Box 7889 The Woodlands, TX 77387	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Credit Card Services
Date 12/03/2024	Payee name Woodforest Acceptance Solutions	
Amount (\$) 122.33 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip P.O. Box 7889 The Woodlands, TX 77387	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Credit Card Services