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) 00054577						2 Total pages filed: 41	
3	COMMITTEE NAME		-			OFFICE USE ONLY	
	North Shore Repul	blican Women					
						Date Received ELECTRONICALLY FILED 01/15/2025	
Δ	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; C	ITY;	STATE; ZIP COE)F		
[ADDRESS	P.O. Box 1993	,				
	_					Date Hand-delivered or Date Postmarked	
	Change of Address	Montagman, TV 77256				Descript //	
		Montgomery, TX 77356				Receipt # Amount	
						Date Processed	
						Date Processed	
						Date Imaged	
						Date imageu	
5	CAMPAIGN	MS / MRS / MR FIRST				MI	
	TREASURER	Mrs. Chris					
	NAME						
		NICKNAME LAST				SUFFIX	
		Gurley					
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE)		APT / SUITE #; C	ITY;	STATE; ZIP CODE	
ľ	TREASURER	49 Fairfield Drive	,	ALT JOILE #, C	··· I ,	STATE, ZIF CODE	
	STREET ADDRESS						
		Mantagenery, TV 77050					
	(Residence or Business)	Montgomery, TX 77356					
7	CAMPAIGN TREASURER	STREET OR PO BOX;		APT / SUITE #;	CITY;	STATE; ZIP CODE	
	MAILING	49 Fairfield Drive					
	ADDRESS						
	Change of Address	Montgomery, TX 77356					
8	CAMPAIGN	AREA CODE PHONE NUMBER	ΕX	TENSION			
ľ	TREASURER	(936) 597-4409					
	PHONE						
9	REPORT	X January 15	30th	day before election		Dissolution (Attach PAC-DR)	
	TYPE			-			
		July 15	8th d	ay before election		10th day after campaign treasurer termination	
			Runo	off			
10	PERIOD	Month Day Year		Month [Day	Year	
1	COVERED	,	THR	OUGH 12/31			
				12/31	, 2024		
11	ELECTION	ELECTION DATE		ELECTION TYP	۶.		
		Month Day Year	Prin		-	Other	
		11/05/2024					
			Ger	leral Special			
		GO	тс	PAGE 2			
For	rms provided by Tex	xas Ethics Commission www.	ethi	cs.state.tx.us		Version V4.1.0.5dd2ace2	

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
North Shore Republicar	Women		00054577	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if			
	applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA		\$	6,091.90
EXPENDITURE TOTALS		DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	37,268.95
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	57,756.79
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of pe true and correct and includes all inforr under Title 15, Election Code.		
		Mrs. Chi	ris Gurley	
		Signature of Car	mpaign Treasu	rer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, tł	nis the	day
of	_, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offic	cer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2

FORM GPAC COVER SHEET PG 3

3 of 41

17 COMMI	17 COMMITTEE NAME 18 Filer ID							
	hore Republican Women	00054577	(Ethics Commission Filers)					
	JLE SUBTOTALS							
NAME C	SUBTOTAL AMOUNT							
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,091.90						
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$					
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$					
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$					
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$					
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$					
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$					
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$					
9.	SCHEDULE E: LOANS		\$					
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 37,268.95					
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$					
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$					
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$					

SUBTOTALS - GPAC

SCHEDULE	A1
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The Ins	truction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 1/23 Rpt: 4/41	
2 FILER NA	ME		3	Filer ID (Ethics Commission	i Filers)
North Sh	ore Republican Women			00054577	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
12/20/20		/	ľ	(+)	\$30.00
	6 Contributor address; City; State; Zip Code				+00.00
	Contributor address, City, State, Zip Code				
	Montgomery, TX 77356				
8 Principal	ccupation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ເ)		
Retired			,		
		<u> </u>	<u> </u>	Amount of Contribution (ft)	
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	фо <u>г</u> оо
11/07/20					\$25.00
	Contributor address; City; State; Zip Code				
	Montgomon (TV 77256				
Duin ain al	Montgomery, TX 77356				
	ccupation / Job title (See Instructions)	Employer (See Instructions	5)		
Retired					
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
12/20/20					\$40.00
	Contributor address; City; State; Zip Code		1		
	Montgomery, TX 77356				
-	ccupation / Job title (See Instructions)	Employer (See Instructions	5)		
Retired					
Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
11/14/20	24 Anderson, Beverly				\$40.00
	Contributor address; City; State; Zip Code				
	Montgomery, TX 77356				
Principal	ccupation / Job title (See Instructions)	Employer (See Instructions	5)		
Retired					
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
11/07/20)		/	\$37.00
					+01100
	Contributor address, City, State, Zip Code				
	Montgomery, TX 77356				
Principal	ccupation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ا		
Retired			-,		

The Ir	struction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 2/23 Rpt: 5/41
2 FILER N	AME	3 Filer ID (Ethics Commission Filers)
	hore Republican Women	00054577
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
12/20/2		\$30.00
	6 Contributor address; City; State; Zip Code	
	Montgomery, TX 77356	
8 Principa	occupation / Job title (See Instructions) 9 Employer (See Instruction	 ns)
Retirec		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/20/2	024 Balfantz, Mary	\$20.00
	Contributor address; City; State; Zip Code	
<u> </u>	Spring, TX 77389	
	occupation / Job title (See Instructions) Employer (See Instruction	15)
Retirec		T
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/20/2		\$30.00
	Contributor address; City; State; Zip Code	
	Spring, TX 77389	
Principa	occupation / Job title (See Instructions) Employer (See Instruction	<u>ן</u> ארג (אר
Retirec		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/27/2		\$30.00
	Contributor address; City; State; Zip Code	
	Montgomery, TX 77356	
	occupation / Job title (See Instructions) Employer (See Instruction	ns)
Retirec		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/20/2	024 Billingsley, Leigh	\$85.00
	Contributor address; City; State; Zip Code	
	Montgomery, TX 77356-8397	
	occupation / Job title (See Instructions) Employer (See Instruction	ns)
Retirec		

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/23 Rpt: 6/41	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	North Shore	Republican Women			00054577	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/03/2024	Blair, Nelda (Mrs.)				\$20.00
		6 Contributor address; City; State; Zip Code				
		The Woodlands, TX 77380				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Attorney					
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/20/2024	Bolton, Irma (Mrs.)				\$30.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired					
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/20/2024	Bowe, Barbara (Mrs.)				\$65.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/20/2024	Broussard, Juanita				\$50.00
		Contributor address; City; State; Zip Code				
		Mastromony TV 77956				
\vdash	Dringingl goog	Montgomery, TX 77356	Employer (See Instructions	<u> </u>		
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
\vdash				1		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 55 00
	12/20/2024	Brown, Janet				\$55.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
\vdash	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired)		

SCHEDULE	A1
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F	The Instruc	ction Guide explains how to complete t	his fo	orm.	1	Total pages Schedule A1: Sch: 4/23 Rpt: 7/41	
2	FILER NAME				3	Filer ID (Ethics Commission	ו Filers)
	North Shore	Republican Women				00054577	
4	Date	5 Full name of contributor out-of-state PAC	(ID#:)	7	Amount of Contribution (\$)	
	11/14/2024	Brown, Jayne (Ms.)					\$30.00
		6 Contributor address; City; State; Zip Code					
		Montgomery, TX 77356-8271					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Retired						
	Date	Full name of contributor out-of-state PAC	(ID#:)	Γ	Amount of Contribution (\$)	
	11/07/2024	Burg, Shirley (Ms.)					\$65.00
		Contributor address; City; State; Zip Code					
		Montgomery, TX 77356					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						
F	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	11/14/2024	Caillouet, Nancy (Mrs.)					\$60.00
		Contributor address; City; State; Zip Code					
		Montgomery, TX 77356					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired teach	her					
	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	12/20/2024	Cambern, Jill (Mrs.)					\$40.00
		Contributor address; City; State; Zip Code			1		
		Montgomery, TX 77356					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						
	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	12/05/2024	Campbell, Cheryl					\$40.00
		Contributor address; City; State; Zip Code			1		
		Montgomery, TX 77356					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						
1							

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/23 Rpt: 8/41	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	North Shore	Republican Women			00054577	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/14/2024	Coleman, Tammy			······	\$140.00
		6 Contributor address; City; State; Zip Code				
		Contributor address, City, State, Zip Code				
		Spring, TX 77384				
8	Principal occu		9 Employer (See Instructions	 ;)		
		agement Coach		,		
╞				_	Account of Contribution (¢)	
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	ΦEE 00
	11/25/2024	Cribbs, Jan				\$55.00
		Contributor address; City; State; Zip Code				
		Willis, TX 77318	· · · · · ·			
		pation / Job title (See Instructions)	Employer (See Instructions)		
	Housewife					
Γ	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/05/2024	Cunningham, Janet				\$30.00
	I	Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
Γ	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Retired					
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/05/2024	Cunningham, Phyllis (Ms.)				\$30.00
	I	Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Retired RN			,		
⊨	Date	Full name of contributor Out-of-state PAC (ID#:		—	Amount of Contribution (\$)	
	12/05/2024	Full name of contributor out-of-state PAC (ID#: Cunningham, Phyllis (Ms.))			\$20.00
	12/03/2024					φ20.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
\vdash	Drinsipal app		Employer (Cool Instructions			
		pation / Job title (See Instructions)	Employer (See Instructions)		
	Retired RN					
L						

SCHEDULE	A1
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Th	ne Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/23 Rpt: 9/41	
2 FIL	LER NAME			3	Filer ID (Ethics Commission	n Filers)
		Republican Women			00054577	
4 Da	ate	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
12	2/05/2024	Cunningham, Phyllis (Ms.)				\$65.00
		6 Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
8 Pri	incipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
Re	etired RN					
Da	ate	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
11	/14/2024	Dahlberg, Laura (Mrs.)				\$40.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356-8380				
Pri	incipal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Ho	ousewife					
Da	ate	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
12	2/20/2024	Darcy-Pawlak, Karen (Mrs.)				\$85.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356-8423				
		pation / Job title (See Instructions)	Employer (See Instructions)		
Re	etired					
Da	ate	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
12	2/20/2024	Dinklage, Mary (Mrs.)				\$40.00
		Contributor address; City; State; Zip Code				
ļ		Montgomery, TX 77316	1 <u>.</u>			
		pation / Job title (See Instructions)	Employer (See Instructions)		
Re	etired			_		
Da		Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	_
11	/14/2024	Doris, Mary-Francis (Mrs.)				\$110.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356		Ļ		
		pation / Job title (See Instructions)	Employer (See Instructions)		
Re	etired					

				-		
	The Instru	ction Guide explains how to complete	e this form.	1	Total pages Schedule A1: Sch: 7/23 Rpt: 10/41	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	North Shore	Republican Women			00054577	
4	Date	5 Full name of contributor out-of-state PA	PAC (ID#:)	7	Amount of Contribution (\$)	
	12/03/2024	Dye, Debbi (Mrs.)				\$55.00
		6 Contributor address; City; State; Zip Code				
_		Montgomery, TX 77356		Ĺ		
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	IS)		
L				-		
	Date	—	PAC (ID#:)		Amount of Contribution (\$)	÷00.00
	11/14/2024	Eckland, Cay (Mrs.)				\$30.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	I IS)		
	Retired	· · · ·		,		
╞	Date	Full name of contributor out-of-state PA	I AC. (ID#:)	Τ	Amount of Contribution (\$)	
	11/14/2024	Eddleman, Barbara	//0 (10//,		, and an	\$20.00
		Contributor address; City; State; Zip Code				
		Conroe, TX 77304				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired					
	Date	Full name of contributor out-of-state PA	PAC (ID#:)	Τ	Amount of Contribution (\$)	
	12/20/2024	Eddleman, Barbara				\$65.00
		Contributor address; City; State; Zip Code		Ϊ		
		Conroe, TX 77304				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	 <)		
	Retired			0)		
	Date	Full name of contributor out-of-state PA		Т	Amount of Contribution (\$)	
	11/20/2024	Ferguson, Joyce	AC (ID)r,			\$15.00
		Contributor address; City; State; Zip Code				
		Conroe, TX 77304				
		pation / Job title (See Instructions)	Employer (See Instructions	is)		
	Retired					

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	The Instru	ction Guide explains how to co	omplete this fo	orm.	1	Total pages Schedule A1: Sch: 8/23 Rpt: 11/41	
2	FILER NAME				3	Filer ID (Ethics Commission	ו Filers)
	North Shore	Republican Women				00054577	
4	Date	5 Full name of contributor out	it-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/14/2024	Fox, Sherry					\$85.00
		6 Contributor address; City; State; Zip	p Code				
		Mongomery, TX 77356	T				
8		pation / Job title (See Instructions)		9 Employer (See Instructions)		
	Retired						
	Date		it-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/20/2024	Fulcher, Bettygail					\$30.00
		Contributor address; City; State; Zip					
		Montgomery, TX 77356					
	Princinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Retired				,		
	Date	Full name of contributor	It-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/27/2024	Gibson, Nancy	$1-01-51ale PAC (1D\pi)$				\$65.00
	11/ <i>C</i> 1/C2	Contributor address; City; State; Zig					Ψ00.02
			peoue				
		Montgomery, TX 77356					
		pation / Job title (See Instructions)		Employer (See Instructions)		
	Retired						
	Date	Full name of contributor	it-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/14/2024	Gottung, Patricia					\$100.00
		Contributor address; City; State; Zip	p Code				
		Monteomory TV 772E6					
	Dringing occu	Montgomery, TX 77356	T	Employer (See Instructions	\		
	Retired	pation / Job title (See Instructions)		Employer (See Instructions)		
			<u> </u>				
	Date 11/14/2024	Full name of contributor out out Graham, Deborah	it-of-state PAC (ID#:)		Amount of Contribution (\$)	\$55.00
	11/14/2024		- 0.4-				φου.υυ
		Contributor address; City; State; Zip	p Coue				
		Montgomery, TX 77356					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Retired						
			1				

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 9/23 Rpt: 12/41	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	3)
	e Republican Women		00054577	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
11/14/2024			\$30	0.00
	6 Contributor address; City; State; Zip Code			
	Montgomery, TX 77356			
-	upation / Job title (See Instructions)	9 Employer (See Instructions		
Retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/25/2024	Greene, Kim (Mrs.)		\$60	0.00
	Contributor address; City; State; Zip Code			
	Montgomery, TX 77356			
	upation / Job title (See Instructions)	Employer (See Instructions		_
Retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/14/2024	Gurley, Christine (Mrs.)		\$100	0.00
	Contributor address; City; State; Zip Code			
	Montgomery, TX 77356			
	upation / Job title (See Instructions)	Employer (See Instructions		
Retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/20/2024	Harper, Becky		\$35	5.00
	Contributor address; City; State; Zip Code			
	Montgomery, TX 77356			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions		
Retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/20/2024	Harper, Becky		\$15	5.00
	Contributor address; City; State; Zip Code			
	Montgomery, TX 77356			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	
Retired				

	The Instruc	ction Guide explains how to o	complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/23 Rpt: 13/41	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		Republican Women				00054577	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/20/2024	Harper, Sam					\$150.00
		6 Contributor address; City; State; Z	Zip Code				
		Montgomery, TX 77356					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Retired						
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/20/2024	Hivnor, Diane (Mrs.)					\$45.00
		Contributor address; City; State; Z	Zip Code				
		-	•				
		Williis, TX 77378					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired						
⊨	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/20/2024	Hostetler, Jody (Mrs.)					\$85.00
		Contributor address; City; State; Z	Zin Code				
			1-				
		Montgomery, TX 77356-8610					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Retired						
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/20/2024	Hutchcroft, Susan (Mrs.)					\$65.00
		Contributor address; City; State; Z	Zip Code				
		-	1-				
		Montgomery, TX 77356					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/20/2024	Jepsen, Susan					\$20.00
		Contributor address; City; State; Z	Zip Code				
			1-				
		Montgomery, TX 77356					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Accountant						
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	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 11/23 Rpt: 14/41	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	North Shore	Republican Women		1	00054577	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7	Amount of Contribution (\$)	
	12/27/2024	Jepsen, Susan				\$40.00
		6 Contributor address; City; State; Zip Code		•		
		Montgomery, TX 77356				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Retired					
	Date	Full name of contributor out-of-state PAC (ID#:	:)	<u> </u>	Amount of Contribution (\$)	
	12/20/2024	Jonas, Barbara (Mrs.)				\$30.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired					
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	T ,	Amount of Contribution (\$)	
	11/14/2024	Jones, Carolyn (Ms.)				\$110.00
		Contributor address; City; State; Zip Code		1		
		Manhaman, TV 770E6				
	Duincipal ecou	Montgomery, TX 77356		Ĺ		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
				1		
	Date	Full name of contributor Out-of-state PAC (ID#:	:)	'	Amount of Contribution (\$)	÷74.00
	12/05/2024	Jones, Carolyn (Ms.)				\$74.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
┝	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ار</u>		
	Retired			5)		
╞		Full name of contributor out-of-state PAC (ID#:	<u> </u>	1	Amount of Contribution (\$)	
	Date 11/12/2024	Full name of contributor out-of-state PAC (ID#: Kate, Fred (Mr.))	'		\$45.00
	11/12/2027					Ψ+0.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired			,		
⊢						

The Instru	iction Guide explains how	w to complete this f	form.		Total pages Schedule A1: Sch: 12/23 Rpt: 15/41	
2 FILER NAME				3	Filer ID (Ethics Commission	n Filers)
North Shore	e Republican Women				00054577	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
12/05/2024	Keyser, Lori					\$140.00
	6 Contributor address; City; S	State; Zip Code		·		
	Spring, TX 77389					
	upation / Job title (See Instruction	IS)	9 Employer (See Instructions	s)		
Accountant						
Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
12/20/2024	Keyser, Lori					\$70.00
	Contributor address; City; S			1		
	Spring, TX 77389					
Principal occu	upation / Job title (See Instruction	IS)	Employer (See Instructions	s)		
Accountant						
Date	Full name of contributor	out-of-state PAC (ID#:_)	T	Amount of Contribution (\$)	
11/07/2024	Keyser, Ron					\$45.00
	Contributor address; City; S	State; Zip Code		·		
	Spring, TX 77389					
	upation / Job title (See Instruction	IS)	Employer (See Instructions	s)		
Business Ov	wner					
Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
11/07/2024	Keyser, Ron					\$40.00
1	Contributor address; City; S	State; Zip Code		1		
1						
l						
L	Spring, TX 77389		1			
	upation / Job title (See Instruction	iS)	Employer (See Instructions	s)		
Business Ov	<i>w</i> ner					
Date	Full name of contributor	out-of-state PAC (ID#:_)]	Amount of Contribution (\$)	_
11/14/2024	Krenek, Mary					\$55.00
1	Contributor address; City; S	State; Zip Code		Ϊ		
1						
l						
L	Montgomery, TX 77356					
	upation / Job title (See Instruction	iS)	Employer (See Instructions	s)		
Retired						
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	The Instru	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 13/23 Rpt: 16/41	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		Republican Women			00054577	ŕ
4		5 Full name of contributor Out-of-state PAC ()	7	Amount of Contribution (\$)	
	11/14/2024	Leonard, Kim	· · · · · · · · · · · · · · · · · · ·		• •	\$60.00
	ļ	6 Contributor address; City; State; Zip Code		ł		
	ļ					
	ļ					
		Montgomery, TX 77356				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Retired					
⊨	Date	Full name of contributor 🔲 out-of-state PAC ((ID#:)	Γ	Amount of Contribution (\$)	
	12/20/2024	Luquette, Brenda				\$40.00
	ł	Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		Montgomery, TX 77356				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired					
	Date	Full name of contributor 🛛 out-of-state PAC ((ID#:)	Ī	Amount of Contribution (\$)	
	11/07/2024	Maguire, Marianna				\$40.00
	ļ	Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		Spring, TX 77386	<u> </u>	ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Homemaker					
	Date	Full name of contributor out-of-state PAC ((ID#:)		Amount of Contribution (\$)	
	11/07/2024	Maguire, Marianna]		\$26.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	Caring TV 77206				
\vdash	Dringing occu	Spring, TX 77386 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Homemaker			5)		
				1		
	Date	Full name of contributor out-of-state PAC ((ID#:)		Amount of Contribution (\$)	ቀ ባር በር
	12/02/2024	Marshall, Jean Ann (Ms.)				\$80.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	Montgomery, TX 77356				
┝	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	=)		
	Retired			5)		
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 14/23 Rpt: 17/41	
2	FILER NAME			3	Filer ID (Ethics Commission	i Filers)
	North Shore	Republican Women			00054577	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/20/2024	Martin, Joan (Mrs.)				\$60.00
		6 Contributor address; City; State; Zip Code		1		
		TV 77050 0400				
_	Dringing oog	Montgomery, TX 77356-8466		<u> </u>		
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
			<u> </u>	Т		
	Date 11/07/2024	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$40.00
	11/0//2024					Φ40.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Housewife					
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/14/2024	McKinnon, Gail (Mrs.)				\$100.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356		Ĺ		
	•	pation / Job title (See Instructions) mories Consultant	Employer (See Instructions	S)		
				.		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢10.00
	11/07/2024	Mendelow, Christy				\$10.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Professional	Coach				
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/20/2024	Michels, Barbara				\$30.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356		<u> </u>		
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired					

The Instru	iction Guide explains how to complete this f	örm.	1 Total pages Schedule A1:
			Sch: 15/23 Rpt: 18/41
2 FILER NAME	e Republican Women		3 Filer ID (Ethics Commission Filers) 00054577
	·		
4 Date 11/14/2024	5 Full name of contributor out-of-state PAC (ID#: Miller, Thelma (Mrs.))	7 Amount of Contribution (\$) \$40.00
11/14/2024			φ 4 0.00
	6 Contributor address; City; State; Zip Code		
	Montgomery, TX 77356		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	\$)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/07/2024	Minor, Sharon (Mrs.)		\$40.00
	Contributor address; City; State; Zip Code		1
	Montgomery, TX 77356		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Retired			3)
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
Dale 11/07/2024)	Amount of Contribution (\$) \$25.00
11/01/202.	Contributor address; City; State; Zip Code		
	Montgomery, TX 77356		
-	upation / Job title (See Instructions)	Employer (See Instructions	3)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/14/2024	Moore, Patti		\$40.00
	Contributor address; City; State; Zip Code		
	Conroe, TX 77384		
Principal occl	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> \$)
Retired			
Date	Full name of contributor Out-of-state PAC (ID#:_)	Amount of Contribution (\$)
11/14/2024			\$55.00
	Contributor address; City; State; Zip Code		1
	Montgomery, TX 77356-4989	1	
-	upation / Job title (See Instructions)	Employer (See Instructions	<i>;</i>)
Retired			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/23 Rpt: 19/41	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	North Shore	Republican Women			00054577	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/07/2024	Mueller, Virginia				\$54.00
		6 Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		Montgomery, TX 77356				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Author					
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/20/2024	Mueller, Virginia				\$85.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Author					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/20/2024	Newberry, Kathleen (Mrs.)				\$40.00
		Contributor address; City; State; Zip Code		1		
	ļ					
		Montgomery, TX 77356				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/14/2024	Ochs, Julie				\$60.00
		Contributor address; City; State; Zip Code		1		
	ļ					
		Montgomery, TX 77356				
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired					
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/07/2024	Pavelka, Katherine				\$54.00
	ļ	Contributor address; City; State; Zip Code		1		
		Montgomery, TX 77356				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired					
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	The Instru	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 17/23 Rpt: 20/41		
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	North Shore Republican Women				00054577	-
4	Date	5 Full name of contributor out-of-state PAC (IE)	7	Amount of Contribution (\$)	
	11/14/2024	Pavelka, Katherine				\$40.00
		6 Contributor address; City; State; Zip Code		1		
		Montgomery, TX 77356				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Retired					
╞	Date	Full name of contributor out-of-state PAC (ID		Γ	Amount of Contribution (\$)	
	12/20/2024	Perilloux, Della				\$40.00
				1		
		Montgomery, TX 77356		$ _{-}$		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired					
	Date	Full name of contributor out-of-state PAC (IE	D#:)	Γ	Amount of Contribution (\$)	
	12/20/2024	Petro, Yolanda				\$50.00
	Contributor address; City; State; Zip Code			1		
Montgomery, TX 77356						
			Employer (See Instructions	5)		
	Finance Mar	lager				
	Date	Full name of contributor 🔲 out-of-state PAC (ID	D#:)	Γ	Amount of Contribution (\$)	
	11/14/2024	Pontious, Kay				\$110.00
		Contributor address; City; State; Zip Code		1		
		Montgomery, TX 77356				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired					
	Date	Full name of contributor out-of-state PAC (IE)#:)		Amount of Contribution (\$)	
	11/14/2024	Rohde, Hella (Mrs.)]		\$35.00
		Contributor address; City; State; Zip Code				
	<u> </u>	Montgomery, TX 77356		Ĺ		
	Principal occupation / Job title (See Instructions) Employer (See Instructions)					
	Retired					
						1

	The Instruc	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 18/23 Rpt: 21/41		
2	2 FILER NAME			3	Filer ID (Ethics Commission	Filers)
	North Shore	Republican Women			00054577	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/20/2024	Russo, Lynette				\$40.00
		6 Contributor address; City; State; Zip Code		ł		
		Montgomery, TX 77356				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Retired					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/20/2024	Sappenfield, Nancy (Mrs.)				\$40.00
		Contributor address; City; State; Zip Code		1		
		Montgomery, TX 77356				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/14/2024	Sekula-Gibbs, Shelley (Dr.)				\$35.00
		Contributor address; City; State; Zip Code		1		
The Woodlands, TX 77380						
	Principal occupation / Job title (See Instructions) Employer (See Instructions)					
	Dermatologis		<u> </u>	-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	· == 00
	11/20/2024	Sekula-Gibbs, Shelley (Dr.)				\$55.00
		Contributor address; City; State; Zip Code				
		The Woodlands, TX 77380				
┝	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Dermatologis			5)		
╞				1		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	#20.00
	12/20/2024	Sheridan, Patricia (Mrs.)				\$30.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
\vdash	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ار</u>		
	Retired			5)		
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	The Instru	ction Guide explains how to complete		Total pages Schedule A1: Sch: 19/23 Rpt: 22/41		
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		Republican Women			00054577	
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:)	7	Amount of Contribution (\$)	
	11/07/2024	Shibley, Sunday				\$47.00
		6 Contributor address; City; State; Zip Code		"		
		Willis, TX 77318				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Homemaker			-		
	Date		AC (ID#:)		Amount of Contribution (\$)	
	11/07/2024	Shibley, Sunday				\$40.00
		Contributor address; City; State; Zip Code		"		
	<u> </u>	Willis, TX 77318		Ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Homemaker			-		
	Date		AC (ID#:)		Amount of Contribution (\$)	
	11/14/2024	Skinner, Sheri				\$40.00
	Contributor address; City; State; Zip Code			Ϊ		
Montgomery, TX 77356				Ĺ		
Principal occupation / Job title (See Instructions) Employer (See Instructions)						
	Retired			-		
	Date		AC (ID#:)		Amount of Contribution (\$)	* * • • • •
	11/07/2024					\$40.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
_	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ം</u>		
	Retired			5)		
╞				<u> </u>		
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	ቀፍራባ በበ
	11/14/2024	South, Ann (Mrs.)				\$560.90
		Contributor address; City; State; Zip Code				
	Montgomery, TX 77356					
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ر</u> ا		
	Retired			5)		
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Т	The Instruc	ction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 20/23 Rpt: 23/41	
2 F	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
N	North Shore	Republican Women		00054577
4 D	Date	5 Full name of contributor out-of-state PAC (ID#	¥:)	7 Amount of Contribution (\$)
1	1/07/2024	Stanton, Genette		\$40.00
		6 Contributor address; City; State; Zip Code		
		Montgomery, TX 77356		
		pation / Job title (See Instructions)	9 Employer (See Instructions	
L	icensed Pro	ofessional Counslor		
D	Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
1	1/07/2024	Stanton, James		\$20.00
	1	Contributor address; City; State; Zip Code		
		Montgomery, TX 77356		
		pation / Job title (See Instructions)	Employer (See Instructions	;)
1	Fravel Agent	: 		
D	Date	Full name of contributor Out-of-state PAC (ID#	¢:)	Amount of Contribution (\$)
1	2/31/2024	Steinmann, Brandon		\$70.00
	Contributor address; City; State; Zip Code			
The Woodlands, TX 77380			<u> </u>	
Principal occupation / Job title (See Instructions) Employer (See Instruction		Employer (See Instructions Montgomery County	i)	
	County Clerk			
	Date	Full name of contributor Out-of-state PAC (ID#	ť:)	Amount of Contribution (\$)
1	1/14/2024	Stephens, Kay		\$55.00
		Contributor address; City; State; Zip Code		
		Willis, TX 77318		
	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>
	Retired			<i>'</i>
	Date 1/07/2024	Full name of contributor out-of-state PAC (ID#	£:)	Amount of Contribution (\$) \$55.00
	.1/0//2024			φυσ.υυ
		Contributor address; City; State; Zip Code		
		Montgomery, TX 77356		
P	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	Accountant	,		,

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	The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 21/23 Rpt: 24/41	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	North Shore	Republican Women			00054577	-
4	Date	5 Full name of contributor out-of-sta	ate PAC (ID#:)) 7	Amount of Contribution (\$)	
	11/07/2024	Stern, Kathleen				\$54.00
		6 Contributor address; City; State; Zip Cod	e			
		Montgomery, TX 77356				
8		pation / Job title (See Instructions)	9 Employer (See Instruct	tions)		
	Accountant					
	Date	Full name of contributor 🛛 out-of-sta	ate PAC (ID#:))	Amount of Contribution (\$)	
	12/20/2024	Stern, Kathleen				\$10.00
		Contributor address; City; State; Zip Cod	e			
		1				
		1				
		Montgomery, TX 77356				
		pation / Job title (See Instructions)	Employer (See Instruct	tions)		
	Accountant					
	Date	Full name of contributor	ate PAC (ID#:))	Amount of Contribution (\$)	
	12/20/2024	Stevens, Lexie				\$30.00
		Contributor address; City; State; Zip Cod	е			
Montgomery, TX 77356						
Principal occupation / Job title (See Instructions) Employer (See Instructions)			tions)			
	Retired					
	Date	Full name of contributor 🛛 out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	11/14/2024	Strickland, Julie				\$40.00
		Contributor address; City; State; Zip Cod	е			
		N				
		Montgomery, TX 77356				
		pation / Job title (See Instructions)	Employer (See Instruct	tions)		
	Retired					
	Date		ate PAC (ID#:)		Amount of Contribution (\$)	_
	12/20/2024	Townsend, Barbara				\$40.00
		Contributor address; City; State; Zip Cod	е			
		N				
	<u> </u>	Montgomery, TX 77356		<u> </u>		
		pation / Job title (See Instructions)	Employer (See Instruct	tions)		
	Retired					

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	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 22/23 Rpt: 25/41	
2	FILER NAME	FILER NAME			Filer ID (Ethics Commission	n Filers)
	North Shore	Republican Women			00054577	
4	Date	5 Full name of contributor out-of-state PAC		7	Amount of Contribution (\$)	
	11/14/2024	Tucker, Katy				\$40.00
		6 Contributor address; City; State; Zip Code				
		Montgomery, TX 77358				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Fitness Instr					
	Date	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
	12/27/2024	Turner, Mary Ann				\$40.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>د)</u>		
	Retired			3)		
_	Date	Full name of contributor Out-of-state PAC	2//D//	Т	Amount of Contribution (\$)	
	12/20/2024	Full name of contributor out-of-state PAC Widak, Mariarosa	י (ID#:)			\$60.00
		Contributor address; City; State; Zip Code				Ψ00.00
		Contributor address, City, State, Zip Code				
	Montgomery, TX 77356					
Principal occupation / Job title (See Instructions) Employer (See Instruction			s)			
	Retired					
	Date	Full name of contributor 🔲 out-of-state PAC	 C (ID#:)		Amount of Contribution (\$)	
	11/14/2024	Wilcox, Carolyn				\$30.00
		Contributor address; City; State; Zip Code		1		
		1				
	Dringing oog	Conroe, TX 77385	Employer (Coo Instruction	<u> </u>		
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	S)		
╞						
	Date 12/20/2024	Full name of contributor out-of-state PAC Withrow, Gwen) (ID#:)		Amount of Contribution (\$)	\$20.00
	1212012024					Φ20.00
		Contributor address; City; State; Zip Code				
		Montgomery, TX 77356				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired					
			1			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 23/23 Rpt: 26/41 2 FILER NAME Filer ID (Ethics Commission Filers) 3 North Shore Republican Women 00054577 5 Full name of contributor Amount of Contribution (\$) 4 Date out-of-state PAC (ID#: 7 11/14/2024 \$40.00 Woodall, Dorothy (Mrs.) 6 Contributor address; City; State; Zip Code Montgomery, TX 77356 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$)) 12/20/2024 \$55.00 Young, Rae-Jean (Mrs.) Contributor address; City; State; Zip Code Montgomery, TX 77356 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/15 Rpt: 27/41	North Shore Republican Women 00054577
4 Date	5 Payee name
12/31/2024	Alliance of New Americans
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3,500.00	Attention: Marlen Tejeda
	7807 Board Crossing 4978
Expenditure from corporate funds	Conroe, TX 77304
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Hispanic Community Outreach (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Citizenship classes and other work done in the Hispanic Community
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/11/2024	Amazon Marketplace
Amount (\$)	Payee address; City; State; Zip Code
\$879.64	410 Terry Avenue North
Expenditure from corporate funds	Seattle, WA 98109
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Caring for America - Pregnancy Center (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Purchased Supplies for Pregnancy Center
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/11/2024	Amazon.com LLC
Amount (\$)	Payee address; City; State; Zip Code
\$28.14	410 Terry Ave. North
Expenditure from corporate funds	Seattle, WA 98101-5210
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Literacy - MELP (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Purchased Book for M.E.L.P. Literacy
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 2/15 Rpt: 28/41	North Shore Republican Women 00054577			
4 Date 12/02/2024	5 Payee name Amazon.com			
6 Amount (\$) \$29.31	7 Payee address; City; State; Zip Code 11501 Alterra Pkwy.			
corporate funds	Austin, TX 78758			
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Binders for New Members (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Binders for New Members 			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
12/12/2024	Amazon.com			
Amount (\$)	Payee address; City; State; Zip Code			
\$38.87	11501 Alterra Pkwy.			
Expenditure from corporate funds	Austin, TX 78758			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Paper goods for Holiday Brunch 			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
11/19/2024	Amore Seafood			
Amount (\$) \$100.00	Payee address; City; State; Zip Code 14860 Hwy 105 West			
Expenditure from corporate funds	Montgomery, TX 77356			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Gift card (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gift for outgoing President of Club 			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 3/15 Rpt: 29/41	North Shore Republican Women 00054577			
4 Date	5 Payee name			
12/12/2024	Aspen Designs			
6 Amount (\$) \$45.95	7 Payee address; City; State; Zip Code P.O.Box 3037			
Expenditure from corporate funds	Annapolis, MD 21403			
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Merchandise for Gift Table (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Merchandise for Gift Table 			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
11/11/2024	Bentwater Yacht & Country Club			
Amount (\$)	Payee address; City; State; Zip Code			
\$90.00	800 Bentwater Dr.			
Expenditure from corporate funds	Montgomery, TX 77356			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Luncheon expense for 2 Speakers plus 1 guest 			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
11/06/2024	Bentwater Yacht & Country Club			
Amount (\$)	Payee address; City; State; Zip Code			
\$19,562.57	800 Bentwater Dr.			
Expenditure from corporate funds	Montgomery, TX 77356			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Expenditures for Fundraiser 			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 4/15 Rpt: 30/41	North Shore Republican Women 00054577		
4 Date	5 Payee name		
12/13/2024	Bentwater Yacht & Country Club		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$60.00	800 Bentwater Dr.		
Expenditure from corporate funds	Montgomery, TX 77356		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF	Event Expense Categories instead at the top of this schedule)		
EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Lunch for Speaker and Guest at Monthly meeting		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
12/12/2024	Costco Wholesale		
Amount (\$)	Payee address; City; State; Zip Code		
\$256.11	8185 State HWY 242		
Expenditure from corporate funds	The Woodlands, TX 77385		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Cost of 41 Poinsettias for Christmas meeting 		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
12/18/2024	GHCFRW PAC		
Amount (\$)	Payee address; City; State; Zip Code		
\$30.00	c/o Amy Byers		
	4851 West Fork Blvd.		
Expenditure from corporate funds	Conroe, TX 77304		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Annual Dues (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Annual Dues to GHCFRW 		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/15 Rpt: 31/41	North Shore Republican Women 00054577
4 Date 11/11/2024	5 Payee name Google Inc.
6 Amount (\$) \$64.12	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Media (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Google Workspace email addresses for officers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/27/2024	Google Inc.
Amount (\$) \$66.52	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Media (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Media - Google Workspace email addresses for officers
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/26/2024	Harland Clarke Corp
Amount (\$) \$34.32	Payee address; City; State; Zip Code 15955 LaCantera Parkway
Expenditure from corporate funds	San Antonio, TX 78256
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Ordered Checks (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fee to reordered checks for club use
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 6/15 Rpt: 32/41	North Shore Republican Women 00054577		
4 Date	5 Payee name		
12/31/2024	Hispanic Conservatives of Montgomery County		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$2,500.00	Attention: Marianna Maguire		
Expenditure from	27119 W. Balsam Fir Circle		
corporate funds	Spring, TX 77386		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Hispanic Community Outreach		
	Check if Austin, TX, officeholder living expense Creation of effective media and other outreach in		
	Hispanic Community		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
12/02/2024	Intuit QuickBooks		
Amount (\$)	Payee address; City; State; Zip Code		
\$105.53	2800 E. Commerce Center Place		
Expenditure from corporate funds	Tucson, AZ 85706		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Monthly Fee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly Fee for Quickbooks financial online 		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
12/31/2024	Intuit QuickBooks		
Amount (\$)	Payee address; City; State; Zip Code		
\$105.53	2800 E. Commerce Center Place		
Expenditure from corporate funds	Tucson, AZ 85706		
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fee for Monthly Financial Software (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fee for Monthly Financial Software 		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 7/15 Rpt: 33/41	North Shore Republican Women 00054577	
4 Date	5 Payee name	
12/31/2024	Jotform	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$434.93	4 Embarcadero Center	
	Suite 780	
Expenditure from corporate funds	San Francisco, CA 94111	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Media - Online Forms	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Media - Online Forms Annual Fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
11/11/2024	Kroger- Montgomery	
Amount (\$)	Payee address; City; State; Zip Code	
\$75.00	20168 Eva Street	
Expenditure from corporate funds	Montgomery, TX 77356	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Gift Certificate (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gift Certificates for Food Bank for Turkeys 	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
12/12/2024	Kroger- Montgomery	
Amount (\$)	Payee address; City; State; Zip Code	
\$465.85	20168 Eva Street	
Expenditure from corporate funds	Montgomery, TX 77356	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Gift Cards (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gift Cards for Christmas to individuals in need for Americanism 	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel OU of District Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 8/15 Rpt: 34/41	North Shore Republican Women 00054577	
4 Date 11/11/2024	5 Payee name Kroger	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$925.00	12605 I-45 North	
Expenditure from corporate funds	Willis, TX 77318	
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Gift Certificates (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gift Certificates for Food Bank for Turkeys 	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
11/11/2024	Mailchimp	
Amount (\$)	Payee address; City; State; Zip Code	
\$13.86	c/o The Rocket Science Group	
	975 Ponce de Leon Avenue NE, #5000	
Expenditure from corporate funds	Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Communications (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Media - Monthly Emails 	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office name Office sought Office held		
Date	Payee name	
12/27/2024	Mailchimp	
Amount (\$)	Payee address; City; State; Zip Code	
\$13.86	c/o The Rocket Science Group	
	975 Ponce de Leon Avenue NE, #5000	
Expenditure from corporate funds	Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Media (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Media - Monthly emails 	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

	EXPENDITURE CATEGORIES FOR	BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repay Fees Office Overt Food/Beverage Expense Polling Expe Gift/Awards/Memorials Expense Printing Exp	Imment/Reinfbursement ead/Rental Expense Solicitation/Fundraising Expense read/Rental Expense Transportation Equipment & Related Expense ense Travel in District ges/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 9/15 Rpt: 35/41	North Shore Republican Women	00054577
4 Date	5 Payee name	
12/31/2024	Mailchimp	
6 Amount (\$)	7 Payee address; City; State; Zip Cod	e
\$13.86	c/o The Rocket Science Group	
	975 Ponce de Leon Avenue NE, #5000	
Expenditure from corporate funds	Atlanta, GA 30308	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Media	 b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Media - Monthly Emails
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office soug	ht Office held
Date	Payee name	
12/02/2024	Montgomery High School Choir	
Amount (\$)	Payee address; City; State; Zip Cod	e
\$300.00	22825 TX 105	
Expenditure from corporate funds	Montgomery, TX 77356	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Honorarium to Choir	 b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Honorarium to Choir for singing at Christmas Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht Office held
Date	Payee name	
11/21/2024	Montgomery Printers	
Amount (\$)	Payee address; City; State; Zip Cod	e
\$425.00	310 North Danville	
	Suite D	
Expenditure from corporate funds	Willis, TX 77378	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (Signs for Fundraiser	b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Signs printed for Fundraiser
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
 Total marca Cabadula E1; 	· · · · ·	
1 Total pages Schedule F1: Sch: 10/15 Rpt: 36/41	2 FILER NAME 3 Filer ID (Ethics Commission Filers) North Shore Republican Women 00054577	
4 Date 12/27/2024	5 Payee name Public Storage	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,296.00	22394 W. FM1097	
Expenditure from corporate funds	Montgomery, TX 77356	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	storage unit rental Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	6 months rental for storage unit	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
11/06/2024	Square Up, Inc.	
Amount (\$)	Payee address; City; State; Zip Code	
\$23.58	1455 Market St.	
\$20.00	Suite 600	
Expenditure from corporate funds	San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees for taking credit cards 	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
11/24/2024	Square Up, Inc.	
Amount (\$)	Payee address; City; State; Zip Code	
\$3.94	1455 Market St.	
ψ0.04	Suite 600	
Expenditure from		
corporate funds	San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fess to take credit cards 	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	

	EXPENDITURE CATEGORIES FOR	₹ BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repa Fees Office Over Food/Beverage Expense Polling Exp - Gift/Awards/Memorials Expense Printing Exp	ayment/Reimbursement rhead/Rental Expense pense Transportation Equipment & Related Expense Travel in District Ages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 11/15 Rpt: 37/41	North Shore Republican Women	00054577
4 Date	5 Payee name	
11/11/2024	Square Up, Inc.	
6 Amount (\$)	7 Payee address; City; State; Zip Cod	de
\$1.61	1455 Market St.	
-	Suite 600	
Expenditure from corporate funds	San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees for taking credit cards
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office soug	ght Office held
Date	Payee name	
11/26/2024	Square Up, Inc.	
Amount (\$)	Payee address; City; State; Zip Cod	de
\$2.19	1455 Market St.	
	Suite 600	
Expenditure from corporate funds	San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees to take credit cards
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office soug	ght Office held
Date	Payee name	
11/30/2024	Square Up, Inc.	
Amount (\$)	Payee address; City; State; Zip Cod	de
\$2.62	1455 Market St.	
	Suite 600	
Expenditure from corporate funds	San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees to take credit cards
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office souc	ght Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Rep. Fees Office Ove Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E	yment/Reimbursement rhead/Rental Expense pense gense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)
Sch: 12/15 Rpt: 38/41	North Shore Republican Women		00054577
4 Date 12/02/2024	5 Payee name Square Up, Inc.		
6 Amount (\$) \$2.78	7 Payee address; City; State; Zip Co 1455 Market St. Suite 600	de	
corporate funds	San Francisco, CA 94103		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		de of Texas. Complete Schedule T. officeholder living expense Iit cards
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
Date	Payee name		
12/04/2024	Square Up, Inc.		
Amount (\$)	Payee address; City; State; Zip Co	de	
\$13.05	1455 Market St.		
	Suite 600		
Expenditure from corporate funds	San Francisco, CA 94103		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		de of Texas. Complete Schedule T. . officeholder living expense credit cards
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held
Date	Payee name		
12/30/2024	Square Up, Inc.		
Amount (\$)	Payee address; City; State; Zip Co	de	
\$2.33	1455 Market St.		
	Suite 600		
Expenditure from corporate funds	San Francisco, CA 94103		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		de of Texas. Complete Schedule T. officeholder living expense dit cards
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1. This is a conservation of the		
1 Total pages Schedule F1: Sch: 13/15 Rpt: 39/41	2 FILER NAME 3 Filer ID (Ethics Commission Filers) North Shore Republican Women 00054577	
4 Date 12/16/2024	5 Payee name TFRW PAC	
6 Amount (\$) \$20.20	7 Payee address; City; State; Zip Code 13740 N. Hwy 183, Ste. J4	
Expenditure from corporate funds	Austin, TX 78750	
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Annual Service Charge (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Annual Service Charge Paid to TFRW PAC 	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
12/19/2024	TFRW PAC	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,125.20	13740 N. Hwy 183, Ste. J4	
Expenditure from corporate funds	Austin, TX 78750	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Payment for 1st Submission (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payment to TFRW PAC for 1st Membership submission for new members 	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Pavee name	
11/06/2024	The Dictionary Project	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,880.00	P.O. Box 1845	
Expenditure from corporate funds	Charleston, SC 29402	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Literacy (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Purchase Dictionaries Students - Literacy Program 	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District - Gift/Awards/Memorials Expense Printing Expense Travel Out of District	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 14/15 Rpt: 40/41	North Shore Republican Women 00054577	
4 Date 11/21/2024	5 Payee name Toys for Tots	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 18251 Quantico Gateway Drive	
Expenditure from corporate funds	Triangle, VA 22172-1776	
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Donation (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation to Toys for Tots 	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
11/19/2024	United States Postal Service	
Amount (\$)	Payee address; City; State; Zip Code	
\$47.45	20821 Eva Street	
	Suite H	
Expenditure from corporate funds	Montgomery, TX 77356-9998	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Postage (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Postage for Mailings Fundraiser 	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
12/31/2024	United States Postal Service	
Amount (\$)	Payee address; City; State; Zip Code	
\$9.68	20821 Eva Street	
	Suite H	
Expenditure from corporate funds	Montgomery, TX 77356-9998	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Certified Mail (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Certified mail to mail IRS Form 8871 	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 15/15 Rpt: 41/41	North Shore Republican Women 00054577	
4 Date 12/12/2024	5 Payee name Walgreens Montgomery	
6 Amount (\$) \$17.97	7 Payee address; City; State; Zip Code 18900 Highway 105 W	
Expenditure from corporate funds	Montgomery, TX 77356	
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Photos processed for President's Book (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Photos processed to place in President's Scrapbook 	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
11/11/2024	Walmart (The Woodlands)	
Amount (\$) \$41.58	Payee address; City; State; Zip Code 3040 College Park Dr.	
Expenditure from corporate funds	The Woodlands, TX 77384	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Caring for America - Pregnancy Center (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Purchased Supplies for Pregnancy Center 	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held		
Date	Payee name	
11/11/2024	Walmart	
Amount (\$) \$114.80	Payee address; City; State; Zip Code 18700 Highway 105 W	
Expenditure from corporate funds	Montgomery, TX 77356	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Caring for America - Pregnancy Center (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Purchased Supplies for Pregnancy Center 	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	