

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) 00054333 | 2 Total pages filed: 31 |
| 3 COMMITTEE NAME Georgetown Area Republican Women PAC | | OFFICE USE ONLY | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1530 Sun City Blvd., Ste. 120 PMB 424 Georgetown, TX 78633 | |
| | | Date Received ELECTRONICALLY FILED 01/09/2025 | |
| | | Date Hand-delivered or Date Postmarked | |
| | | Receipt # | Amount |
| | | Date Processed | |
| Date Imaged | | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST Beverly A. | MI | |
| | NICKNAME LAST Kohnert | SUFFIX | |
| 6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small> | STREET ADDRESS (NO PO BOX PLEASE); 1032 Shinnecock Hills Dr. Georgetown, TX 78628 | APT / SUITE #; | CITY; STATE; ZIP CODE |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | STREET OR PO BOX; 1032 Shinnecock Hills Dr. Georgetown, TX 78628 | APT / SUITE #; | CITY; STATE; ZIP CODE |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (720) 988-8719 | | |
| 9 REPORT TYPE | <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15 | <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff | <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> 10th day after campaign treasurer termination |
| 10 PERIOD COVERED | Month Day Year 10/27/2024 | THROUGH | Month Day Year 12/31/2024 |
| 11 ELECTION | ELECTION DATE Month Day Year 11/05/2024 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | ELECTION TYPE <input type="checkbox"/> Runoff <input type="checkbox"/> Special <input type="checkbox"/> Other |

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

| | |
|--|---|
| 12 COMMITTEE NAME Georgetown Area Republican Women PAC | 13 Filer ID (Ethics Commission Filers) 00054333 |
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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) | \$ 1,319.00 |
| | <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold | |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 6,629.87 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 150.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 5,316.33 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 20,000.56 |
| 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.

Beverly A. Kohnert

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 Georgetown Area Republican Women PAC | | 18 Filer ID (Ethics Commission Filers) 00054333 |
| 19 SCHEDULE SUBTOTALS | | SUBTOTAL AMOUNT |
| | NAME OF SCHEDULE | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 6,629.87 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 3. | <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ 0.00 |
| 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 checked="" type="checkbox"/> SCHEDULE E: LOANS | \$ 0.00 |
| 10. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 5,316.33 |
| 11. | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ 0.00 |
| 12. | <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 13. | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 0.00 |
| 14. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 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: 1/19 Rpt: 4/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 11/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Patrice | 7 Amount of Contribution (\$) \$11.32 |
| | 6 Contributor address; City; State; Zip Code Georgetown, TX 78628 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 11/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolton, Sarah | Amount of Contribution (\$) \$27.78 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78633 | |
| Principal occupation / Job title (See Instructions) Insurance Agent | | Employer (See Instructions) |
| Date 12/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolton, Sarah | Amount of Contribution (\$) \$27.78 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78633 | |
| Principal occupation / Job title (See Instructions) Insurance Agent | | Employer (See Instructions) |
| Date 12/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolton, Sarah | Amount of Contribution (\$) \$142.00 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78633 | |
| Principal occupation / Job title (See Instructions) Insurance Agent | | Employer (See Instructions) |
| Date 12/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruchmiller, Sarah | Amount of Contribution (\$) \$11.32 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78633 | |
| Principal occupation / Job title (See Instructions) District Judge | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/19 Rpt: 5/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 12/19/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bygum, Huldah (Beth-Anne) <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628 | 7 Amount of Contribution (\$) \$173.00 |
| 8 Principal occupation / Job title (See Instructions) VP, Chief Security Officer | | 9 Employer (See Instructions) |
| Date 12/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callahan , Carole <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628 | Amount of Contribution (\$) \$27.78 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 11/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavarretta, Kim Mary <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633 | Amount of Contribution (\$) \$27.78 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 12/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavarretta, Kim Mary <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633 | Amount of Contribution (\$) \$27.78 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 11/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooke, Carol <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Semi-Retired | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/19 Rpt: 6/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 12/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooke, Carol | 7 Amount of Contribution (\$) \$55.57 |
| | 6 Contributor address; City; State; Zip Code Georgetown, TX 78628 | |
| 8 Principal occupation / Job title (See Instructions) Semi-Retired | | 9 Employer (See Instructions) |
| Date 12/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooke, Carol | Amount of Contribution (\$) \$168.00 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78628 | |
| Principal occupation / Job title (See Instructions) Semi-Retired | | Employer (See Instructions) |
| Date 12/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornelius, Bob | Amount of Contribution (\$) \$132.00 |
| | Contributor address; City; State; Zip Code Taylor, TX 76574 | |
| Principal occupation / Job title (See Instructions) Small Business Owner | | Employer (See Instructions) |
| Date 12/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornelius, Bob | Amount of Contribution (\$) \$27.78 |
| | Contributor address; City; State; Zip Code Taylor, TX 76574 | |
| Principal occupation / Job title (See Instructions) Small Business Owner | | Employer (See Instructions) |
| Date 11/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornett, Cynthia | Amount of Contribution (\$) \$27.78 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78628 | |
| Principal occupation / Job title (See Instructions) Self Employed | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/19 Rpt: 7/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 12/10/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Nita | 7 Amount of Contribution (\$) \$27.78 |
| | 6 Contributor address; City; State; Zip Code Georgetown, TX 78628 | |
| 8 Principal occupation / Job title (See Instructions) Homemaker | | 9 Employer (See Instructions) |
| Date 12/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVillez, Sue | Amount of Contribution (\$) \$27.78 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78633 | |
| Principal occupation / Job title (See Instructions) Retired Nurse | | Employer (See Instructions) |
| Date 12/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVillez, Sue | Amount of Contribution (\$) \$138.00 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78633 | |
| Principal occupation / Job title (See Instructions) Retired Nurse | | Employer (See Instructions) |
| Date 12/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVillez, Sue | Amount of Contribution (\$) \$130.00 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78633 | |
| Principal occupation / Job title (See Instructions) Retired Nurse | | Employer (See Instructions) |
| Date 11/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durnin, Linda | Amount of Contribution (\$) \$11.32 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78633 | |
| 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: 5/19 Rpt: 8/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 12/14/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durnin, Linda <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633 | 7 Amount of Contribution (\$) \$142.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 11/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eisner, Amanda <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633 | Amount of Contribution (\$) \$27.78 |
| 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#: _____) Eisner, Amanda <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633 | Amount of Contribution (\$) \$27.78 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 12/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fairbrother, Bill <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78680 | Amount of Contribution (\$) \$27.78 |
| Principal occupation / Job title (See Instructions) Chairman Williamson County Republican Party | | Employer (See Instructions) |
| Date 11/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox Oswaks, Doreen <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633 | Amount of Contribution (\$) \$27.78 |
| Principal occupation / Job title (See Instructions) Retired Special Educator | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/19 Rpt: 9/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 11/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, LaVonne <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633 | 7 Amount of Contribution (\$) \$193.12 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 12/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, LaVonne <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633 | Amount of Contribution (\$) \$27.78 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 11/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedrich, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78759 | Amount of Contribution (\$) \$173.00 |
| Principal occupation / Job title (See Instructions) Bookkeeper | | Employer (See Instructions) |
| Date 11/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedrich, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78759 | Amount of Contribution (\$) \$39.50 |
| Principal occupation / Job title (See Instructions) Bookkeeper | | Employer (See Instructions) |
| Date 11/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedrich, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78759 | Amount of Contribution (\$) \$27.78 |
| Principal occupation / Job title (See Instructions) Bookkeeper | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/19 Rpt: 10/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 11/15/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedrich, Susan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759 | 7 Amount of Contribution (\$) \$27.78 |
| 8 Principal occupation / Job title (See Instructions) Bookkeeper | | 9 Employer (See Instructions) |
| Date 12/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedrich, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78759 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Bookkeeper | | Employer (See Instructions) |
| Date 12/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Laura Paige <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626 | Amount of Contribution (\$) \$27.78 |
| Principal occupation / Job title (See Instructions) Manage Law Practice | | Employer (See Instructions) |
| Date 12/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hough, Betsy <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626 | Amount of Contribution (\$) \$27.78 |
| Principal occupation / Job title (See Instructions) Retired Paralegal | | Employer (See Instructions) |
| Date 12/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Carol <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633 | Amount of Contribution (\$) \$27.78 |
| 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: 8/19 Rpt: 11/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 11/14/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leal, Stacy | 7 Amount of Contribution (\$) \$39.50 |
| | 6 Contributor address; City; State; Zip Code Georgetown, TX 76574 | |
| 8 Principal occupation / Job title (See Instructions) Retired Teacher | | 9 Employer (See Instructions) |
| Date 12/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lichtenstein, Anne | Amount of Contribution (\$) \$173.00 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78633 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 11/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindemann, Matt | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78627 | |
| Principal occupation / Job title (See Instructions) Law Enforcement | | Employer (See Instructions) |
| Date 11/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madsen, Judith | Amount of Contribution (\$) \$11.32 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78633 | |
| 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#: _____) Madsen, Judith | Amount of Contribution (\$) \$11.32 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78633 | |
| 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: 9/19 Rpt: 12/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 12/05/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madsen, Judith | 7 Amount of Contribution (\$) \$142.00 |
| | 6 Contributor address; City; State; Zip Code Georgetown, TX 78633 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 12/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maynard, Tom | Amount of Contribution (\$) \$27.78 |
| | Contributor address; City; State; Zip Code Florence, TX 76527 | |
| Principal occupation / Job title (See Instructions) Exec. Director | | Employer (See Instructions) TXFFA |
| Date 12/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCloskey, Michael | Amount of Contribution (\$) \$26.00 |
| | Contributor address; City; State; Zip Code Cedar Park, TX 78630 | |
| Principal occupation / Job title (See Instructions) Director Of Sales | | Employer (See Instructions) |
| Date 11/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDaniel, Linda | Amount of Contribution (\$) \$27.78 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78628 | |
| 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#: _____) McDaniel, Linda | Amount of Contribution (\$) \$27.78 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78628 | |
| 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: 10/19 Rpt: 13/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 12/19/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLean, Evelyn <hr/> 6 Contributor address; City; State; Zip Code Jarrell, TX 78627 | 7 Amount of Contribution (\$) \$38.00 |
| 8 Principal occupation / Job title (See Instructions) Judge | | 9 Employer (See Instructions) |
| Date 11/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michalka, Terri <hr/> Contributor address; City; State; Zip Code Florence, TX 76527 | Amount of Contribution (\$) \$27.78 |
| Principal occupation / Job title (See Instructions) Independent Personal Development Coach | | Employer (See Instructions) |
| Date 11/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Sarah <hr/> Contributor address; City; State; Zip Code Liberty Hill , TX 78642 | Amount of Contribution (\$) \$11.32 |
| Principal occupation / Job title (See Instructions) Assistant District Attorney | | Employer (See Instructions) |
| Date 12/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Sarah <hr/> Contributor address; City; State; Zip Code Liberty Hill , TX 78642 | Amount of Contribution (\$) \$27.78 |
| Principal occupation / Job title (See Instructions) Assistant District Attorney | | Employer (See Instructions) |
| Date 12/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Sarah <hr/> Contributor address; City; State; Zip Code Liberty Hill , TX 78642 | Amount of Contribution (\$) \$142.00 |
| Principal occupation / Job title (See Instructions) Assistant District Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/19 Rpt: 14/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 11/23/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noble, Dixsie | 7 Amount of Contribution (\$) \$142.00 |
| 6 Contributor address; City; State; Zip Code Georgetown, TX 78633 | | |
| 8 Principal occupation / Job title (See Instructions) Retired Banker | | 9 Employer (See Instructions) |
| Date 11/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Allison | Amount of Contribution (\$) \$27.78 |
| Contributor address; City; State; Zip Code Georgetown, TX 78633 | | |
| Principal occupation / Job title (See Instructions) Management | | Employer (See Instructions) |
| Date 11/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Allison | Amount of Contribution (\$) \$142.00 |
| Contributor address; City; State; Zip Code Georgetown, TX 78633 | | |
| Principal occupation / Job title (See Instructions) Management | | Employer (See Instructions) |
| Date 11/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peloquin, Coeta | Amount of Contribution (\$) \$27.78 |
| Contributor address; City; State; Zip Code Georgetown, TX 78628 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 12/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peloquin, Coeta | Amount of Contribution (\$) \$27.78 |
| Contributor address; City; State; Zip Code Georgetown, TX 78628 | | |
| 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: 12/19 Rpt: 15/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 11/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Punaro, Joy | 7 Amount of Contribution (\$) \$27.78 |
| | 6 Contributor address; City; State; Zip Code Georgetown, TX 78626 | |
| 8 Principal occupation / Job title (See Instructions) Office Assistant | | 9 Employer (See Instructions) |
| Date 12/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Punaro, Joy | Amount of Contribution (\$) \$11.32 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78626 | |
| Principal occupation / Job title (See Instructions) Office Assistant | | Employer (See Instructions) |
| Date 11/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Martha | Amount of Contribution (\$) \$39.50 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78626 | |
| Principal occupation / Job title (See Instructions) Retired law enforcement | | Employer (See Instructions) |
| Date 12/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Anastasia (Stacey) | Amount of Contribution (\$) \$142.25 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78633 | |
| 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#: _____) Robinson, Anastasia (Stacey) | Amount of Contribution (\$) \$11.32 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78633 | |
| 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: 13/19 Rpt: 16/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 11/17/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Terri | 7 Amount of Contribution (\$) |
| | 6 Contributor address; City; State; Zip Code Georgetown, TX 78628 | |
| 8 Principal occupation / Job title (See Instructions) Store Manager | | 9 Employer (See Instructions) |
| Date 11/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Terri | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Georgetown, TX 78628 | |
| Principal occupation / Job title (See Instructions) Store Manager | | Employer (See Instructions) |
| Date 11/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Terri | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Georgetown, TX 78628 | |
| Principal occupation / Job title (See Instructions) Store Manager | | Employer (See Instructions) |
| Date 12/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Terri | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Georgetown, TX 78628 | |
| Principal occupation / Job title (See Instructions) Store Manager | | Employer (See Instructions) |
| Date 12/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Terri | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Georgetown, TX 78628 | |
| Principal occupation / Job title (See Instructions) Store Manager | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 14/19 Rpt: 17/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 11/15/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Janice | 7 Amount of Contribution (\$) \$27.78 |
| | 6 Contributor address; City; State; Zip Code Georgetown, TX 78628 | |
| 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#: _____) Ross, Janice | Amount of Contribution (\$) \$173.00 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78628 | |
| 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#: _____) Ross, Janice | Amount of Contribution (\$) \$27.78 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78628 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 11/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Terry | Amount of Contribution (\$) \$11.32 |
| | Contributor address; City; State; Zip Code Georgetown, TX 78633 | |
| 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#: _____) Samuelson, Michele | Amount of Contribution (\$) \$39.50 |
| | Contributor address; City; State; Zip Code Austin, TX 78717 | |
| Principal occupation / Job title (See Instructions) Outreach Coordinator | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 15/19 Rpt: 18/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 11/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Karen <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633 | 7 Amount of Contribution (\$) \$27.78 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 12/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Karen <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633 | Amount of Contribution (\$) \$142.00 |
| 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#: _____) Smith, Karen <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633 | Amount of Contribution (\$) \$27.78 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 11/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stade, Silvie <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628 | Amount of Contribution (\$) \$55.57 |
| Principal occupation / Job title (See Instructions) Office Staff | | Employer (See Instructions) GISD |
| Date 12/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stade, Silvie <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628 | Amount of Contribution (\$) \$55.57 |
| Principal occupation / Job title (See Instructions) Office Staff | | Employer (See Instructions) GISD |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 16/19 Rpt: 19/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 11/20/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templeton, Audrey | 7 Amount of Contribution (\$) \$26.00 |
| 6 Contributor address; City; State; Zip Code Georgetown, TX 78628 | | |
| 8 Principal occupation / Job title (See Instructions) IT Project Manager | | 9 Employer (See Instructions) |
| Date 12/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templeton, Audrey | Amount of Contribution (\$) \$27.78 |
| Contributor address; City; State; Zip Code Georgetown, TX 78628 | | |
| Principal occupation / Job title (See Instructions) IT Project Manager | | Employer (See Instructions) |
| Date 11/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Totty, Cat | Amount of Contribution (\$) \$26.00 |
| Contributor address; City; State; Zip Code Georgetown, TX 78633 | | |
| Principal occupation / Job title (See Instructions) RMLO | | Employer (See Instructions) |
| Date 12/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Totty, Cat | Amount of Contribution (\$) \$157.00 |
| Contributor address; City; State; Zip Code Georgetown, TX 78633 | | |
| Principal occupation / Job title (See Instructions) RMLO | | Employer (See Instructions) |
| Date 12/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Totty, Cat | Amount of Contribution (\$) \$11.32 |
| Contributor address; City; State; Zip Code Georgetown, TX 78633 | | |
| Principal occupation / Job title (See Instructions) RMLO | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 17/19 Rpt: 20/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 11/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Triggs, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633 | 7 Amount of Contribution (\$) \$27.78 |
| 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#: _____) Triggs, Cynthia <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633 | Amount of Contribution (\$) \$142.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 11/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Triggs, Cynthia <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 12/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Triggs, Cynthia <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633 | Amount of Contribution (\$) \$27.78 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 12/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Donna <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681 | Amount of Contribution (\$) \$27.78 |
| 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: 18/19 Rpt: 21/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 11/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkie, Gigi | 7 Amount of Contribution (\$) \$39.10 |
| 6 Contributor address; City; State; Zip Code Georgetown, TX 78633 | | |
| 8 Principal occupation / Job title (See Instructions) Real Estate Agent | | 9 Employer (See Instructions) |
| Date 12/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkie, Gigi | Amount of Contribution (\$) \$142.00 |
| Contributor address; City; State; Zip Code Georgetown, TX 78633 | | |
| Principal occupation / Job title (See Instructions) Real Estate Agent | | Employer (See Instructions) |
| Date 12/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkie, Gigi | Amount of Contribution (\$) \$55.57 |
| Contributor address; City; State; Zip Code Georgetown, TX 78633 | | |
| Principal occupation / Job title (See Instructions) Real Estate Agent | | Employer (See Instructions) |
| Date 11/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkie, Kevin | Amount of Contribution (\$) \$147.00 |
| Contributor address; City; State; Zip Code Georgetown, TX 78633 | | |
| Principal occupation / Job title (See Instructions) Law Enforcement | | Employer (See Instructions) |
| Date 12/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Angela | Amount of Contribution (\$) \$31.00 |
| Contributor address; City; State; Zip Code Leander, TX 78641 | | |
| Principal occupation / Job title (See Instructions) self employed | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 19/19 Rpt: 22/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 11/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Samantha <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633 | 7 Amount of Contribution (\$) \$27.78 |
| 8 Principal occupation / Job title (See Instructions) Health Coach | | 9 Employer (See Instructions) |
| Date 11/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Samantha <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633 | Amount of Contribution (\$) \$39.50 |
| Principal occupation / Job title (See Instructions) Health Coach | | Employer (See Instructions) |
| Date 12/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Samantha <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633 | Amount of Contribution (\$) \$27.78 |
| Principal occupation / Job title (See Instructions) Health Coach | | Employer (See Instructions) |
| Date 11/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Chris <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628 | Amount of Contribution (\$) \$11.32 |
| Principal occupation / Job title (See Instructions) Retired Attorney | | Employer (See Instructions) |
| Date 12/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Chris <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628 | Amount of Contribution (\$) \$11.32 |
| Principal occupation / Job title (See Instructions) Retired Attorney | | Employer (See Instructions) |

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 23/31

2 FILER NAME
Georgetown Area Republican Women PAC

3 Filer ID (Ethics Commission Filers)
00054333

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule E: Sch: 1/1 Rpt: 24/31 |
| 2 FILER NAME Georgetown Area Republican Women PAC | | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ 0.00 |
| 5 Date of loan | 7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) | 9 Loan Amount (\$) |
| 6 Is lender a financial institution? | 8 Lender address; City; State; Zip Code | 10 Interest Rate |
| | | 11 Maturity Date |
| 12 Principal occupation / Job title (See Instructions) | | 13 Employer (See Instructions) |
| 14 Description of Collateral <input type="checkbox"/> None | | 15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/> |
| 16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable | 17 Name of guarantor | 19 Amount Guaranteed (\$) |
| | 18 Guarantor address; City; State; Zip Code | |
| 20 Principal occupation | | 21 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: 1/7 Rpt: 25/31 | 2 FILER NAME Georgetown Area Republican Women PAC | 3 Filer ID (Ethics Commission Filers) 00054333 |
|--|---|--|

| | |
|-----------------------------|--|
| 4 Date 11/11/2024 | 5 Payee name A Matter of Taste |
|-----------------------------|--|

| | |
|---|---|
| 6 Amount (\$) \$135.31 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 4230 Williams Dr Georgetown, TX 78628 |
|---|---|

| | | |
|---------------------------------|--|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation made in honor of Gwen Hodges, 2005-2006 GARW President |
|---------------------------------|--|---|

| | | | |
|--|-----------------------------|---------------|-------------|
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| | |
|--------------------|--|
| Date 12/02/2024 | Payee name Abilene Christian University |
|--------------------|--|

| | |
|--|--|
| Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code ACU Box 27940 Abilene, TX 79699 |
|--|--|

| | | |
|-------------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Audrey McDonald Scholarship Award |
|-------------------------------|--|---|

| | | | |
|---|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|--------------------------|
| Date 11/15/2024 | Payee name Amazon.com |
|--------------------|--------------------------|

| | |
|--|---|
| Amount (\$) \$276.19 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 81226 Seattle, WA 98108 |
|--|---|

| | | |
|-------------------------------|--|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Literacy |
|-------------------------------|--|--|

| | | | |
|---|-----------------------------|---------------|-------------|
| Complete ONLY 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: 2/7 Rpt: 26/31 | 2 FILER NAME Georgetown Area Republican Women PAC | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 11/16/2024 | 5 Payee name Amazon.com | |
| 6 Amount (\$) \$12.20 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 81226 Seattle, WA 98108 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Literacy |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/17/2024 | Payee name Constant Contact | |
| Amount (\$) \$41.50 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1601 Trapelo Road, Suite 329 Waltham, MA 02451 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/12/2024 | Payee name GTX Awards and Engraving | |
| Amount (\$) \$47.63 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 202 South Austin Avenue Suite 104 Georgetown, TX 78626 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Nametags | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Nametags |
| 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
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: 3/7 Rpt: 27/31 | 2 FILER NAME Georgetown Area Republican Women PAC | 3 Filer ID (Ethics Commission Filers) 00054333 |
|--|---|--|

| | |
|-----------------------------|---|
| 4 Date 12/12/2024 | 5 Payee name GTX Awards and Engraving |
|-----------------------------|---|

| | |
|---------------------------------|--|
| 6 Amount (\$) \$23.82 | 7 Payee address; City; State; Zip Code 202 South Austin Avenue Suite 104 Georgetown, TX 78626 |
|---------------------------------|--|

Expenditure from corporate funds

| | | |
|---------------------------------|--|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Nametag | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Nametag |
|---------------------------------|--|---|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|--|
| Date 11/21/2024 | Payee name Georgetown Chamber of Commerce |
|--------------------|--|

| | |
|-------------------------|---|
| Amount (\$) \$700.00 | Payee address; City; State; Zip Code 1 Chamber Way Georgetown, TX 78626 |
|-------------------------|---|

Expenditure from corporate funds

| | | |
|------------------------|--|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Conference Room Rental |
|------------------------|--|--|

| | | | |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 12/19/2024 | Payee name Georgetown Chamber of Commerce |
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| Amount (\$) \$350.00 | Payee address; City; State; Zip Code 1 Chamber Way Georgetown, TX 78626 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Conference Room Rental |
|------------------------|--|--|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> 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
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.

| | | |
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| 1 Total pages Schedule F1: Sch: 4/7 Rpt: 28/31 | 2 FILER NAME Georgetown Area Republican Women PAC | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 12/19/2024 | 5 Payee name H.E.B. | |
| 6 Amount (\$) \$21.26 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 4500 Williams Dr Georgetown, TX 78628 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Water, plates, bowls, utensils |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/19/2024 | Payee name Olive Garden Italian Restaurant | |
| Amount (\$) \$556.43 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1401 I-35 Georgetown, TX 78626 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Catered Luncheon |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/17/2024 | Payee name PayPal | |
| Amount (\$) \$73.16 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2211 N. First St San Jose, CA 95131 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
| 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
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.

| | | |
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| 1 Total pages Schedule F1: Sch: 5/7 Rpt: 29/31 | 2 FILER NAME Georgetown Area Republican Women PAC | 3 Filer ID (Ethics Commission Filers) 00054333 |
| 4 Date 11/21/2024 | 5 Payee name Pok-e-Jo's | |
| 6 Amount (\$) \$832.08 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 610 N Austin Ave Georgetown, TX 78626 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Catered Luncheon |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/19/2024 | Payee name Square, Inc. | |
| Amount (\$) \$100.50 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1955 Broadway, Suite 600 Oakland, CA 94612 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/11/2024 | Payee name Sympathy.shop | |
| Amount (\$) \$39.95 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1 Batesville Blvd Batesville, IN 47006 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation made in honor of Gwen Hodges, 2005-2006 GARW President |
| 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
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.

| | | |
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| 1 Total pages Schedule F1: Sch: 6/7 Rpt: 30/31 | 2 FILER NAME Georgetown Area Republican Women PAC | 3 Filer ID (Ethics Commission Filers) 00054333 |
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| 4 Date 10/27/2024 | 5 Payee name TFRW PAC |
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|---------------------------------|---|
| 6 Amount (\$) \$25.30 | 7 Payee address; City; State; Zip Code 13741 North Highway 183 Suite J4 Austin, TX 78750 |
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Expenditure from corporate funds

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Fees |
|---------------------------------|---|---|

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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 11/30/2024 | Payee name TFRW PAC |
|--------------------|------------------------|

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| Amount (\$) \$20.20 | Payee address; City; State; Zip Code 13741 North Highway 183 Suite J4 Austin, TX 78750 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2025 Annual Service Charge |
|------------------------|--|---|

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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 11/30/2024 | Payee name TFRW PAC |
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|-------------------------|--|
| Amount (\$) \$404.80 | Payee address; City; State; Zip Code 13741 North Highway 183 Suite J4 Austin, TX 78750 |
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Expenditure from corporate funds

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Membership Dues | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues |
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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: 7/7 Rpt: 31/31 | 2 FILER NAME Georgetown Area Republican Women PAC | 3 Filer ID (Ethics Commission Filers) 00054333 |
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| 4 Date 12/22/2024 | 5 Payee name TFRW PAC |
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|---|---|
| 6 Amount (\$) \$480.70 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 13741 North Highway 183 Suite J4 Austin, TX 78750 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Membership Dues | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues |
|---------------------------------|--|---|

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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 12/29/2024 | Payee name TFRW PAC |
|--------------------|------------------------|

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| Amount (\$) \$25.30 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 13741 North Highway 183 Suite J4 Austin, TX 78750 |
|---|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Membership Dues | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues |
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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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