GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form.	1	Filer ID (Ethics Commission Filers) 00054333	2	Total pages filed: 31
3	COMMITTEE NAME				Τ	OFFICE USE ONLY
	Georgetown Area	Republican Women PAC			D	ate Received
					E	LECTRONICALLY FILED 1/09/2025
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CIT	Ϋ;	STATE; ZIP CODE		
	ADDRE35	1530 Sun City Blvd., Ste. 120			Da	ate Hand-delivered or Date Postmarked
	Change of Address	PMB 424				
	_	Georgetown, TX 78633			Re	eceipt # Amount
					Da	ate Processed
					Da	ate Imaged
5	CAMPAIGN	MS / MRS / MR FIRST			MI	
	TREASURER NAME	Beverly A.				
		NICKNAME LAST			SL	JFFIX
		Kohnert				
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY;		STATE; ZIP CODE
ľ	TREASURER	1032 Shinnecock Hills Dr.			,	
	STREET ADDRESS					
	(Residence or Business)	Georgetown, TX 78628				
7	CAMPAIGN	STREET OR PO BOX;		APT / SUITE #; CITY	Y;	STATE; ZIP CODE
	TREASURER MAILING	1032 Shinnecock Hills Dr.				
	ADDRESS					
	Change of Address	Georgetown, TX 78628				
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXT	ENSION		
	TREASURER PHONE	(720) 988-8719				
		<u> </u>				
۱ ^۹	REPORT TYPE	X January 15 30)th c	lay before election		Dissolution (Attach PAC-DR)
			h da	y before election		10th day after campaign treasurer termination
		July 15	unof	f		
10	PERIOD	Month Day Year		Month Day		Year
	COVERED	· ·	HRC	DUGH 12/31/202	24	
11	ELECTION				F	
		Month Day Year	rim	ary Runoff	L	Other
			Sene	eral Special		
		GO -	го	PAGE 2		
For	rms provided by Te			s.state.tx.us		Version V4.1.0.5dd2ace2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME	(Ethics Commission Filers)			
Georgetown Area Repu	blican Women PAC		000543	333
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		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
		b. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M X check here if this report	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	1,319.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	6,629.87
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	\$	150.00	
	4. TOTAL POLITICA	\$	5,316.33	
CONTRIBUTION BALANCE				
OUTSTANDING LOAN TOTALS		MOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT	<u> </u>	I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Beverly A	A. Kohnert	t
		Signature of Car		
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, tł	is the	day
		vhich, witness my hand and seal of office.		
Signature of officer ad	ninistering oath	Printed name of officer administering oath	Title of	officer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

					3 01 31
17 COM	MITTE	E NAME	18 Filer ID	(Ethics	Commission Filers)
Geor	getov	vn Area Republican Women PAC	00054333	_	
		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT	
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	6,629.87	
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.	Х	\$	0.00		
4.		\$			
5.		\$			
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.	X SCHEDULE E: LOANS				0.00
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	5,316.33
11.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
13.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

SCHEDULE	A1
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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 Filer 00054333 4 Date 11/11/2024 5 Full name of contributor out-of-state PAC (ID#:) Baker, Patrice 7 Amount of Contribution (\$) Baker, Patrice Georgetown, TX 78628 7 Bemployer (See Instructions) Retired 9 Employer (See Instructions) Retired 9 Amount of Contribution (\$) Date 11/18/2024 Full name of contributor out-of-state PAC (ID#:) Bolton, Sarah Amount of Contribution (\$)
Georgetown Area Republican Women PAC 00054333 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) 11/11/2024 Baker, Patrice 5 Contributor address; City; State; Zip Code 7 Amount of Contribution (\$) 6 Contributor address; City; State; Zip Code 6 Contributor address; City; State; Zip Code 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Retired Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/18/2024 Bolton, Sarah 5 Employer (See Instructions) 5 Employer (See Instructions)
Georgetown Area Republican Women PAC 00054333 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) 11/11/2024 Baker, Patrice 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (\$) \$1 6 Contributor address; City; State; Zip Code 6 Contributor address; City; State; Zip Code 9 Employer (See Instructions) Pate Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$2 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$2 11/18/2024 Bolton, Sarah out-of-state PAC (ID#:) Amount of Contribution (\$) \$2
11/11/2024 Baker, Patrice 6 Contributor address; City; State; Zip Code 9 Employer (See Instructions) Retired 9 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/18/2024 Bolton, Sarah
6 Contributor address; City; State; Zip Code 6 Contributor address; City; State; Zip Code 6 Georgetown, TX 78628 8 Principal occupation / Job title (See Instructions) Retired 9 Date Full name of contributor out-of-state PAC (ID#:) 11/18/2024 Bolton, Sarah \$2
B Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/18/2024 Bolton, Sarah \$2
B Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/18/2024 Bolton, Sarah \$2
8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/18/2024 Bolton, Sarah \$2
8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/18/2024 Bolton, Sarah \$2
Retired Amount of Contributor (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/18/2024 Bolton, Sarah \$2
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/18/2024 Bolton, Sarah \$2
11/18/2024 Bolton, Sarah \$2
Contributor address; City; State; Zip Code
Georgetown, TX 78633
Principal occupation / Job title (See Instructions) Employer (See Instructions)
Insurance Agent
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
12/15/2024 Bolton, Sarah \$2
Contributor address; City; State; Zip Code
Georgetown, TX 78633
Principal occupation / Job title (See Instructions) Employer (See Instructions)
Insurance Agent
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
12/19/2024 Bolton, Sarah \$14
Contributor address; City; State; Zip Code
Georgetown, TX 78633
Principal occupation / Job title (See Instructions) Employer (See Instructions)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Insurance Agent
Principal occupation / Job title (See Instructions) Employer (See Instructions) Insurance Agent Date Full name of contributor out-of-state PAC (ID#:)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Insurance Agent Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 12/15/2024 Bruchmiller, Sarah \$1
Principal occupation / Job title (See Instructions) Employer (See Instructions) Insurance Agent Date Full name of contributor out-of-state PAC (ID#:)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Insurance Agent Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 12/15/2024 Bruchmiller, Sarah \$1
Principal occupation / Job title (See Instructions) Employer (See Instructions) Insurance Agent Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 12/15/2024 Bruchmiller, Sarah Contributor address; City; State; Zip Code \$1
Principal occupation / Job title (See Instructions) Employer (See Instructions) Insurance Agent Full name of contributor
Principal occupation / Job title (See Instructions) Insurance Agent Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 12/15/2024 Bruchmiller, Sarah \$1 Contributor address; City; State; Zip Code \$1 Georgetown, TX 78633 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Insurance Agent Full name of contributor out-of-state PAC (ID#:) Date Full name of contributor out-of-state PAC (ID#:) 12/15/2024 Bruchmiller, Sarah Contributor address; City; State; Zip Code \$1 Georgetown, TX 78633 Georgetown, TX 78633

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 2/19 Rpt: 5/31	
2 FILER NAME			3 Filer ID (Ethics Commission	ı Filers)
	n Area Republican Women PAC		00054333	/
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
12/19/2024	Bygum, Huldah (Beth-Anne)			\$173.00
	6 Contributor address; City; State; Zip Code			
	Georgetown, TX 78628			
	upation / Job title (See Instructions)	9 Employer (See Instructions))	
VP, Chief Se	ecurity Officer			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/13/2024	Callahan , Carole			\$27.78
	Contributor address; City; State; Zip Code			
	Georgetown, TX 78628	<u> </u>		
-	upation / Job title (See Instructions)	Employer (See Instructions))	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/10/2024	Cavarretta, Kim Mary			\$27.78
	Contributor address; City; State; Zip Code			
	Georgetown, TX 78633	<u> </u>		
	upation / Job title (See Instructions)	Employer (See Instructions))	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/10/2024	Cavarretta, Kim Mary			\$27.78
	Contributor address; City; State; Zip Code			
	Georgetown, TX 78633	<u> </u>		
•	upation / Job title (See Instructions)	Employer (See Instructions))	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/09/2024	Cooke, Carol			\$25.00
	Contributor address; City; State; Zip Code			
	Georgetown, TX 78628	<u> </u>		
-	upation / Job title (See Instructions)	Employer (See Instructions))	
Semi-Retire	d			

	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 3/19 Rpt: 6/31	
2	FILER NAME			3	Filer ID (Ethics Commission	i Filers)
		Area Republican Women PAC			00054333	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/08/2024	Cooke, Carol				\$55.57
		6 Contributor address; City; State; Zip Code		1		
		Georgetown, TX 78628				
8			B Employer (See Instructions	5)		
	Semi-Retire					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/19/2024	Cooke, Carol				\$168.00
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78628				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Semi-Retired	ł				
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/03/2024	Cornelius, Bob	/			\$132.00
	Contributor address; City; State; Zip Code					
		Taylor, TX 76574				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Small Busine					
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	12/16/2024	Cornelius, Bob)			\$27.78
	12/10/2021	Contributor address; City; State; Zip Code				¢21110
		Contributor address, City, State, Zip Code				
		Taylor, TX 76574				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ו</u> ג)		
	Small Busine			,		
	Date	Full name of contributor out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	11/17/2024	Full name of contributor out-of-state PAC (ID#: Cornett, Cynthia)		Amount of Continuation (\$)	\$27.78
	11/1//2024	-				Ψ21.10
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78628				
⊢	Principal accu		Employer (Soo Instructions	<u> </u>		
	Self Employ	pation / Job title (See Instructions)	Employer (See Instructions	"		
\vdash		54				
1						

The broken of the Outline have to example to this form	
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 4/19 Rpt: 7/31
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Georgetown Area Republican Women PAC	00054333
4 Date 5 Full name of contributor Image: out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
12/10/2024 Davidson, Nita	\$27.78
6 Contributor address; City; State; Zip Code	
Georgetown, TX 78628	
 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction) 	ons)
Homemaker	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/15/2024 DeVillez, Sue	\$27.78
Contributor address; City; State; Zip Code	
Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ons)
Retired Nurse	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/28/2024 DeVillez, Sue	\$138.00
Contributor address; City; State; Zip Code	
Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) Employer (See Instruction)	JIS)
Date Full name of contributor out-of-state PAC (ID#:) 12/28/2024 DaV(illog_Support	Amount of Contribution (\$)
12/28/2024 DeVillez, Sue	\$130.00
Contributor address; City; State; Zip Code	
Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	าทร)
Principal occupation / Job title (See Instructions) Employer (See Instruction)	ons)
Retired Nurse	
Retired Nurse	Amount of Contribution (\$)
Retired Nurse Date Full name of contributor 11/19/2024 Durnin, Linda	
Retired Nurse Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
Retired Nurse Date Full name of contributor 11/19/2024 Durnin, Linda	Amount of Contribution (\$)
Retired Nurse Date Full name of contributor 11/19/2024 Durnin, Linda	Amount of Contribution (\$)
Retired Nurse Full name of contributor out-of-state PAC (ID#:) 11/19/2024 Durnin, Linda Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$)
Retired Nurse Full name of contributor out-of-state PAC (ID#:) 11/19/2024 Durnin, Linda Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$)
Retired Nurse Full name of contributor out-of-state PAC (ID#:) 11/19/2024 Durnin, Linda Contributor address; City; State; Zip Code Georgetown, TX 78633 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Amount of Contribution (\$)

			1 Total pages Schodule A1:
The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 5/19 Rpt: 8/31
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Georgetown	Area Republican Women PAC		00054333
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
12/14/2024	Durnin, Linda		\$142.00
	6 Contributor address; City; State; Zip Code		1
	Georgetown, TX 78633		
8 Principal occu		9 Employer (See Instructions	<u> </u> 3)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/11/2024	Eisner, Amanda		\$27.78
	Contributor address; City; State; Zip Code		1
Dringing loogu	Georgetown, TX 78633	Employer (Cap Instructions	-
Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions	;)
		<u> </u>	Amount of Contribution (\$)
Date 12/12/2024	Full name of contributor out-of-state PAC (ID#: Eisner, Amanda)	Amount of Contribution (\$) \$27.78
	Contributor address; City; State; Zip Code		Ψ Σ ο
	Continuitor address, City, State, Zip Code		
	Georgetown, TX 78633		
-	upation / Job title (See Instructions)	Employer (See Instructions	3)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/16/2024	Fairbrother, Bill		\$27.78
	Contributor address; City; State; Zip Code		
	Round Rock, TX 78680		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)
Chairman W	/illiamson County Republican Party		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/10/2024	Fox Oswaks, Doreen		\$27.78
	Contributor address; City; State; Zip Code		1
	0.555551000 TV 70622		
Dringing oog	Georgetown, TX 78633	Employer (See Instructions	
	upation / Job title (See Instructions) cial Educator	Employer (See Instructions	3)

The Instru	iction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 6/19 Rpt: 9/31
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	n Area Republican Women PAC		00054333
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
11/21/2024	Frazier, LaVonne		\$193.1
	6 Contributor address; City; State; Zip Code		
	Georgetown, TX 78633		
Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u>}</u>
Retired)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/14/2024			\$27.7
	Contributor address; City; State; Zip Code		
	Georgetown, TX 78633		
-	upation / Job title (See Instructions)	Employer (See Instructions	6)
Retired			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/07/2024	Friedrich, Susan		\$173.0
	Contributor address; City; State; Zip Code		
	Austin, TX 78759		<u> </u>
Bookkeeper	upation / Job title (See Instructions)	Employer (See Instructions	6)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/07/2024			\$39.5
	Contributor address; City; State; Zip Code		
	Austin, TX 78759		<u> </u>
Bookkeeper	upation / Job title (See Instructions)	Employer (See Instructions	5)
		<u> </u>	Amount of Contribution (\$)
Date 11/12/2024)	Amount of Contribution (\$) \$27.7
11/12/2024			φ21.1
	Contributor address; City; State; Zip Code		
	Austin, TX 78759		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	l s)
Bookkeeper			, ,
		1	

	The Instru	ction Guide explains how to comple	ete this fo	orm.	1	Total pages Schedule A1: Sch: 7/19 Rpt: 10/31	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		Area Republican Women PAC				00054333	1 11010)
4	Date	5 Full name of contributor 🗌 out-of-stat	e PAC (ID#:)	7	Amount of Contribution (\$)	
	11/15/2024	Friedrich, Susan					\$27.78
		6 Contributor address; City; State; Zip Code					
		Austin, TX 78759					
		pation / Job title (See Instructions)		9 Employer (See Instructions	;)		
	Bookkeeper						
	Date	Full name of contributor 🛛 out-of-stat	e PAC (ID#:)		Amount of Contribution (\$)	
	12/19/2024	Friedrich, Susan					\$25.00
		Contributor address; City; State; Zip Code					
		Austin, TX 78759					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Bookkeeper						
	Date	Full name of contributor 🛛 out-of-stat	e PAC (ID#:)		Amount of Contribution (\$)	
	12/16/2024 Grimes, Laura Paige					\$27.78	
	Contributor address; City; State; Zip Code						
	Georgetown, TX 78626						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Manage Lav	/ Practice					
	Date	Full name of contributor 🗌 out-of-stat	e PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2024	Hough, Betsy					\$27.78
		Contributor address; City; State; Zip Code					
		Georgetown, TX 78626					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired Para	legal					
	Date	Full name of contributor 🛛 out-of-stat	e PAC (ID#:)		Amount of Contribution (\$)	
	12/11/2024	Johnson, Carol					\$27.78
		Contributor address; City; State; Zip Code					
		Georgetown, TX 78633					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						

	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 8/19 Rpt: 11/31	
2	FILER NAME			3	Filer ID (Ethics Commission	i Filers)
		Area Republican Women PAC			00054333	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/14/2024	Leal, Stacy				\$39.50
		6 Contributor address; City; State; Zip Code		1		
		Georgetown, TX 76574				
8	Principal occu	pation / Job title (See Instructions)	B Employer (See Instructions	5)		
	Retired Tead	her				
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/06/2024	Lichtenstein, Anne				\$173.00
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78633				
	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 (\$)	
	11/21/2024	Lindemann, Matt				\$25.00
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78627				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Law Enforce	ment				
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/12/2024	Madsen, Judith				\$11.32
		Contributor address; City; State; Zip Code		1		
		Georgetown, TX 78633				
		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	Madsen, Judith				\$11.32
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78633				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired					
1						

SCHEDULE	A1
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Sch: 9/19 I		
2 FILER NAME			3 Filer ID (E	thics Commissior	n Filers)
Georgetown	Area Republican Women PAC		00054333		-
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of C	Contribution (\$)	
12/05/2024	Madsen, Judith				\$142.00
	6 Contributor address; City; State; Zip Code				
	Georgetown, TX 78633				
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
Retired					
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of C	Contribution (\$)	
12/13/2024	Maynard, Tom				\$27.78
	Contributor address; City; State; Zip Code				
	Florence, TX 76527				
	pation / Job title (See Instructions)	Employer (See Instructions			
Exec. Directo	rc	TXFFA			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of C	Contribution (\$)	
12/19/2024	McCloskey, Michael				\$26.00
	Contributor address; City; State; Zip Code				
	Cedar Park, TX 78630				
•	pation / Job title (See Instructions)	Employer (See Instructions)		
Director Of S	,ales				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of C	Contribution (\$)	
11/12/2024	McDaniel, Linda				\$27.78
	Contributor address; City; State; Zip Code				
	Coorgotourn TV 70620				
Dringing agou	Georgetown, TX 78628	Employer (Cool Instructions			
Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
		<u> </u>			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of C	Contribution (\$)	* 27 70
12/12/2024	McDaniel, Linda				\$27.78
	Contributor address; City; State; Zip Code				
	Georgetown, TX 78628				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	۱		
Retired			1		

	The Instru	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 10/19 Rpt: 13/31	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
ľ		Area Republican Women PAC		ľ	00054333	
4	Date	5 Full name of contributor 🗌 out-of-state PAC (II	D#:)	7	Amount of Contribution (\$)	
	12/19/2024	McLean, Evelyn				\$38.00
		6 Contributor address; City; State; Zip Code		1		
		Jarrell, TX 78627				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Judge					
	Date	Full name of contributor 🗌 out-of-state PAC (II	D#:)		Amount of Contribution (\$)	
	11/12/2024	Michalka, Terri				\$27.78
		Contributor address; City; State; Zip Code		1		
		Florence, TX 76527				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Independent	Personal Development Coach				
⊨	Date	Full name of contributor out-of-state PAC (II		Г	Amount of Contribution (\$)	
	11/20/2024	Moore, Sarah				\$11.32
		Contributor address; City; State; Zip Code		ł		
		Liberty Hill , TX 78642				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Assistant Dis	strict Attorney				
	Date	Full name of contributor Out-of-state PAC (II		Г	Amount of Contribution (\$)	
	12/13/2024	Moore, Sarah				\$27.78
		Contributor address; City; State; Zip Code		ł		
		Liberty Hill,TX 78642				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Assistant Dis	strict Attorney				
	Date	Full name of contributor Out-of-state PAC (II	D#:)	Г	Amount of Contribution (\$)	
	12/19/2024	Moore, Sarah				\$142.00
		Contributor address; City; State; Zip Code		•		
1		Liberty Hill , TX 78642				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	1 5)		
		strict Attorney		•		
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 11/19 Rpt: 14/31	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
ľ		Area Republican Women PAC			00054333	
4	Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7	Amount of Contribution (\$)	
	11/23/2024	Noble, Dixsie				\$142.00
		6 Contributor address; City; State; Zip Code		"		
		Georgetown, TX 78633				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Retired Banl	ker				
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	11/10/2024	Owens, Allison				\$27.78
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78633				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Managemen	t				
	Date	Full name of contributor out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	11/21/2024	Owens, Allison				\$142.00
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78633	· · · · · · · · · · · · · · · · · ·			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Managemen					
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	11/11/2024	Peloquin, Coeta				\$27.78
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78628				
⊢	Dringing ago	-	Employer (Coo Instructions			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
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	Date	Full name of contributor Out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	407 70
	12/13/2024	Peloquin, Coeta				\$27.78
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78628				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired			5)		
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	The Instru	ction Guide explains how to complete this t	form.		s Schedule A1: 9 Rpt: 15/31	
2	FILER NAME				Ethics Commissio	n Filers)
[Area Republican Women PAC		00054333		
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of	Contribution (\$)	
	11/11/2024	Punaro, Joy				\$27.78
		6 Contributor address; City; State; Zip Code				
		Georgetown, TX 78626				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Office Assis	tant				
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of	Contribution (\$)	
	12/10/2024	Punaro, Joy				\$11.32
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78626				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Office Assis	tant				
	Date	Full name of contributor out-of-state PAC (ID#:_	·)	Amount of	Contribution (\$)	
	11/15/2024	Reyna, Martha				\$39.50
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78626				
		pation / Job title (See Instructions)	Employer (See Instructions)		
	Retired law e	enforcement				
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of	Contribution (\$)	
	12/19/2024	Robinson, Anastasia (Stacey)				\$142.25
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78633	-			
		pation / Job title (See Instructions)	Employer (See Instructions)		
	Retired					
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of	Contribution (\$)	
	12/11/2024	Robinson, Anastasia (Stacey)				\$11.32
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78633				
		pation / Job title (See Instructions)	Employer (See Instructions)		
	Retired					
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	The Instru	ction Guide explains how to complete this fo	orm.		otal pages Schedule A1: ch: 13/19 Rpt: 16/31	
2	FILER NAME			3 =	iler ID (Ethics Commission	Eilers)
		Area Republican Women PAC			0054333	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 A	mount of Contribution (\$)	
	11/17/2024	Rodriguez, Terri				\$10.50
		6 Contributor address; City; State; Zip Code				
		Georgetown, TX 78628				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Store Manag	jer				
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	A	mount of Contribution (\$)	
	11/17/2024	Rodriguez, Terri				\$15.00
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78628				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Store Manag	er				
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	A	mount of Contribution (\$)	
	11/30/2024	Rodriguez, Terri				\$142.00
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78628				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Store Manag	jer				
	Date	Full name of contributor out-of-state PAC (ID#:)	A	mount of Contribution (\$)	
	12/12/2024	Rodriguez, Terri				\$31.00
		Contributor address; City; State; Zip Code				
		Georgetown, TX 78628				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Store Manag	jer				
	Date	Full name of contributor out-of-state PAC (ID#:)	A	mount of Contribution (\$)	
	12/16/2024	Rodriguez, Terri				\$22.64
		Contributor address; City; State; Zip Code		1		
		Georgetown, TX 78628				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Store Manag	jer				

The Instruction Guide explains how to complete this form. 1 Total ranges Shateliak A1: Sch: 14/19 Rpt: 1731 2 FILER NAME Shift ID (Ethics Commission Filers) 00054333 4 Date 5 Fint name of contributor in out-of-state PAC (Dim) 7 Amount of Contribution (\$) \$27.78 6 Date 6 Contributor address: City, State: Zip Code 7 Amount of Contribution (\$) \$27.78 7 Brincipal occupation / Job title (See Instructions) 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) 7 Retired Full name of contributor in out-of-state PAC (Dim					
Georgetown Area Republican Women PAC 00054333 4 Date 5 Full name of contributor out-of-state PAC ([Der	The Instruc	ction Guide explains how to complete this f	form.		
Georgetown Area Republican Women PAC 00054333 4 Date 5 Full name of contributor out-of-state PAC ([Der	2 FILER NAME				r Filers)
11/15/2024 Ross, Janice \$27.78 6 Contributor address; City; State; Zip Code \$27.78 7 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Pate Full name of contributor out-of-state PAC (D#					11 11010)
6 Contributor address; City; State: Zip Code Georgetown, TX 78628 9 8 Principal occupation / Job title (See Instructions) 9 Entered Amount of Contribution (S) 11/1/5/2024 Full name of contributor out-of-state PAC (Der	4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
6 Contributor address; City; State; Zip Code B Principal occupation / Job title (See Instructions) Retired State Date Full name of contributor 11/15/2024 Full name of contributor Georgetown, TX 78628 Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Georgetown, TX 78628 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor Date Full name of contributor 12/14/2024 Full name of contributor Georgetown, TX 78628 Employer (See Instructions) Retired Georgetown, TX 78628 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Georgetown, TX 78628 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Georgetown, TX 78628 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Georgetown, TX 78633 Principal occupation / Job title (See Instructions) Employer (See Instructions) <	11/15/2024				\$27.78
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Patier Full name of contributor out-of-state PAC (DPF					
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Patier Full name of contributor out-of-state PAC (DPF					
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Patier Full name of contributor out-of-state PAC (DPF		Ceordetown TX 78628			
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11/15/2024 Ross, Janice \$173.00 Contributor address; City; State; Zip Code Georgetown, TX 78628 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#:				, 	
Contributor address; City; State; Zip Code Georgetown, TX 78628 Principal occupation / Job title (See Instructions) Retired Date Full name of contributor 12/14/2024 Ross, Janice Contributor address; City; State; Zip Code Amount of Contribution (\$) 12/14/2024 Georgetown, TX 78628 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code Georgetown, TX 78628 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Amount of Contribution (\$) Date Full name of contributor address; City; State; Zip Code Amount of Contribution (\$) 12/14/2024 Ross, Janice S27.78 Contributor address; City; State; Zip Code Georgetown, TX 78628 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor	11/15/2024				\$173.00
Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Ross, Janice \$27.78 Contributor address; City; State; Zip Code Georgetown, TX 78628 Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/12/2024 Ross, Terry Amount of Contribution (\$) \$11.32 Contributor address; City; State; Zip Code Georgetown, TX 78633 Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) \$11.32 Onte Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/05/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/05/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/05/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/05/2024					
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Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/14/2024 Ross, Janice \$27.78 Contributor address; City; State; Zip Code \$27.78 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Amount of Contribution (\$) Date Full name of contributor 11/12/2024 Ross, Terry Contributor address; City; State; Zip Code Georgetown, TX 78633 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Date Principal occupation / Job title (See Instructions) Retired Date Principal occupation / Job title (See Instructions) Retired Date Principal occupation / Job title (See Instructions) Retired Date 12/05/2024 Samuelson, Michele Contributor address; City; State; Zip Code Austin, TX 78717 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)		pation / Job title (See Instructions)	Employer (See Instructions))	
12/14/2024 Ross, Janice \$27.78 Contributor address; City; State; Zip Code Georgetown, TX 78628 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Amount of Contribution (\$) 11/12/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/12/2024 Four address; City; State; Zip Code Samuel Son, TX 78633 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Georgetown, TX 78633 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Samuelson, Michele \$39.50 Contributor address; City; State; Zip Code Amount of Contribution (\$) 12/05/2024 Samuelson, Michele \$39.50 Contributor address; City; State; Zip Code Amount of Contribution (\$) Austin, TX 78717 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	Retired				
Contributor address; City; State; Zip Code Georgetown, TX 78628 Principal occupation / Job title (See Instructions) Retired Date Full name of contributor 0ut-of-state PAC (ID#;) Amount of Contribution (\$) 11/12/2024 Georgetown, TX 78633 Principal occupation / Job title (See Instructions) Retired Principal occupation / Job title (See Instructions) Retired Principal occupation / Job title (See Instructions) Retired Date Full name of contributor 0ut-of-state PAC (ID#;		Full name of contributor out-of-state PAC (ID#:))	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code Georgetown, TX 78628 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#:) Date Full name of contributor out-of-state PAC (ID#:) 11/12/2024 Ross, Terry Contributor address; City; State; Zip Code Amount of Contribution (\$) Georgetown, TX 78633 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Georgetown, TX 78633 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$39.50 Contributor address; City; State; Zip Code	12/14/2024				\$27.78
Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 11/12/2024 Ross, Terry Amount of Contribution (\$) Contributor address; City; State; Zip Code Georgetown, TX 78633 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Samuelson, Michele \$39.50 Contributor address; City; State; Zip Code Amount of Contribution (\$) \$39.50 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$39.50 Pate Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/05/2024 Samuelson, Michele \$39.50 \$39.50 Contributor address; City; State; Zip Code Austin, TX 78717 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)					
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11/12/2024 Ross, Terry \$11.32 Contributor address; City; State; Zip Code Georgetown, TX 78633 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor Date Full name of contributor 12/05/2024 Samuelson, Michele Contributor address; City; State; Zip Code Amount of Contribution (\$) Samuelson, Michele \$39.50 Contributor address; City; State; Zip Code \$39.50 Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)			<u> </u>		
Contributor address; City; State; Zip Code Georgetown, TX 78633 Principal occupation / Job title (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) Samuelson, Michele Contributor address; City; State; Zip Code Austin, TX 78717 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions))	Amount of Contribution (\$)	* • • • • • •
Georgetown, TX 78633 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/05/2024 Samuelson, Michele \$39.50 Contributor address; City; State; Zip Code Austin, TX 78717 Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	11/12/2024	-			\$11.32
Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 12/05/2024 Samuelson, Michele Contributor address; City; State; Zip Code Amount of Contribution (\$) Austin, TX 78717 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 12/05/2024 Samuelson, Michele Contributor address; City; State; Zip Code Amount of Contribution (\$) Austin, TX 78717 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 12/05/2024 Samuelson, Michele Contributor address; City; State; Zip Code Amount of Contribution (\$) Austin, TX 78717 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)		Georaetown. TX 78633			
Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/05/2024 Samuelson, Michele \$39.50 Contributor address; City; State; Zip Code Full name of contributor address; City; State; Zip Code Samuelson, Michele Austin, TX 78717 Employer (See Instructions) Employer (See Instructions)	Principal occu		Emplover (See Instructions))	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/05/2024 Samuelson, Michele \$39.50 Contributor address; City; State; Zip Code Austin, TX 78717 Principal occupation / Job title (See Instructions) Employer (See Instructions)			,		
12/05/2024 Samuelson, Michele \$39.50 Contributor address; City; State; Zip Code Austin, TX 78717 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code Austin, TX 78717 Principal occupation / Job title (See Instructions) Employer (See Instructions)			/		\$39.50
Austin, TX 78717 Principal occupation / Job title (See Instructions) Employer (See Instructions)					T
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
		Austin, TX 78717			
Outreach Coordinator	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
	Outreach Co	pordinator			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 15/19 Rpt: 18/31	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	Area Republican Women PAC		00054333	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
11/18/2024	Smith, Karen			\$27.78
	6 Contributor address; City; State; Zip Code			
	Georgetown, TX 78633			
-	ipation / Job title (See Instructions)	9 Employer (See Instructions))	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/08/2024	Smith, Karen			\$142.00
	Contributor address; City; State; Zip Code			
	Georgetown, TX 78633			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/14/2024	Smith, Karen			\$27.78
	Contributor address; City; State; Zip Code			
	Georgetown, TX 78633			
-	upation / Job title (See Instructions)	Employer (See Instructions))	
Retired				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/12/2024	Stade, Silvie			\$55.57
	Contributor address; City; State; Zip Code			
	Georgetown, TX 78628			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Office Staff		GISD		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/11/2024	Stade, Silvie			\$55.57
	Contributor address; City; State; Zip Code			
	Georgetown, TX 78628			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Office Staff		GISD		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 16/19 Rpt: 19/31	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	n Area Republican Women PAC		00054333	1 11013)
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
11/20/2024				\$26.00
	6 Contributor address; City; State; Zip Code			
	Georgetown, TX 78628			
8 Principal occi	upation / Job title (See Instructions)	9 Employer (See Instructions)	
IT Project N			,	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
12/13/2024	Templeton, Audrey			\$27.78
	Contributor address; City; State; Zip Code			
	Georgetown, TX 78628			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions)	
IT Project M	lanager			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
11/18/2024	Totty, Cat			\$26.00
	Contributor address; City; State; Zip Code			
	Georgetown, TX 78633			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions)	
RMLO				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/02/2024	Totty, Cat			\$157.00
	Contributor address; City; State; Zip Code			
	Georgetown, TX 78633			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions)	
RMLO				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
12/16/2024	Totty, Cat			\$11.32
	Contributor address; City; State; Zip Code			
	Georgetown, TX 78633			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions)	
RMLO				

_							
	The Instru	ction Guide explains how to com	plete this fo	orm.	1	Total pages Schedule A1: Sch: 17/19 Rpt: 20/31	
2	FILER NAME				3	Filer ID (Ethics Commission	i Filers)
		Area Republican Women PAC				00054333	
4	Date	5 Full name of contributor out-of-s	state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/12/2024	Triggs, Cynthia					\$27.78
		6 Contributor address; City; State; Zip Co					
		Georgetown, TX 78633					
Q	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	<u> </u>		
0	Retired				·)		
	Date	Full name of contributor out-of-	state PAC (ID#:)		Amount of Contribution (\$)	
	11/15/2024	Triggs, Cynthia					\$142.00
		Contributor address; City; State; Zip Co					
		Georgetown, TX 78633					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						
	Date	Full name of contributor out-of-	state PAC (ID#:)		Amount of Contribution (\$)	
	11/21/2024	Triggs, Cynthia					\$40.00
		Contributor address; City; State; Zip Co					
		Georgetown, TX 78633					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						
	Date	Full name of contributor 🛛 out-of-	state PAC (ID#:)		Amount of Contribution (\$)	
	12/10/2024	Triggs, Cynthia					\$27.78
		Contributor address; City; State; Zip Co			1		
		Georgetown, TX 78633					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						
	Date	Full name of contributor 🛛 out-of-	state PAC (ID#:)		Amount of Contribution (\$)	
	12/10/2024	Tucker, Donna					\$27.78
		Contributor address; City; State; Zip Co			1		
		Round Rock, TX 78681					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						

	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 18/19 Rpt: 21/31	
2	FILER NAME			3	Filer ID (Ethics Commission	i Filers)
		Area Republican Women PAC			00054333	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/12/2024	Wilkie, Gigi				\$39.10
		6 Contributor address; City; State; Zip Code		1		
		Georgetown, TX 78633				
8			9 Employer (See Instructions	5)		
	Real Estate	Agent				
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/01/2024	Wilkie, Gigi				\$142.00
		Contributor address; City; State; Zip Code		1		
		Georgetown, TX 78633				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Real Estate	Agent				
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/05/2024	Wilkie, Gigi				\$55.57
		Contributor address; City; State; Zip Code		1		
		Georgetown, TX 78633				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Real Estate	Agent				
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/21/2024	Wilkie, Kevin				\$147.00
		Contributor address; City; State; Zip Code		1		
		Georgetown, TX 78633				
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Law Enforce	ment				
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/19/2024	Williams, Angela				\$31.00
		Contributor address; City; State; Zip Code		1		
		Leander, TX 78641				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	self employe	a				
1						

The Instruc	ction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 19/19 Rpt: 22/31			
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)	
Georgetown Area Republican Women PAC			00054333		
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)		
11/12/2024	Williams, Samantha		\$	\$27.78	
	6 Contributor address; City; State; Zip Code				
	Georgetown, TX 78633				
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
Health Coac	h				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)		
11/30/2024	Williams, Samantha			\$39.50	
	Georgetown, TX 78633				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)		
Health Coac	.h				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
12/10/2024	Williams, Samantha			\$27.78	
	Contributor address; City; State; Zip Code				
	Georgetown, TX 78633				
	upation / Job title (See Instructions)	Employer (See Instructions			
Health Coac	h				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
11/11/2024	Wilson, Chris		\$	\$11.32	
	Contributor address; City; State; Zip Code				
	Georgetown, TX 78628	1			
	Ipation / Job title (See Instructions)	Employer (See Instructions	;)		
Retired Attor	ney				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)		
12/10/2024	Wilson, Chris		\$	\$11.32	
	Contributor address; City; State; Zip Code				
	Georgetown, TX 78628	Employer (See Instructions	-		
-					
Retired Attor	ney				

PLEDGED CONTRIBUTIONS SCHEDULE **B** 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 23/31 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Georgetown Area Republican Women PAC 00054333 4 \$ 0.00 TOTAL OF UNITEMIZED PLEDGES In-kind description 5 Date 6 Full name of pledgor out-of-state PAC (ID#: 8 Amount of 9 1 (If applicable) pledge (\$) 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)

Georgetown Area Republican Women PAC 0005433 4 TOTAL OF UNITEMIZED LOANS \$ 0.00 5 Date of Ioan 7 Name of lender 0.0t-of-state PAC (ID#:	LOANS					SCHEDU	ILE E
Georgetown Area Republican Women PAC 0005433 4 TOTAL OF UNITEMIZED LOANS \$ 0.00 5 Date of Ioan 7 Name of lender out-of-state PAC (ID#:	The Instruction Guide explains how to complete this form						
TOTAL OF UNITEMIZED LOANS \$ 0.00 5 Date of loan 7 Name of lender out-of-state PAC (ID#:) 9 Loan Amount (\$) 6 Is lender a financial institution? 8 Lender address; City; State; Zip Code 10 Interest Rate 12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) 14 Description of Colleteral 14 Description of Colleteral 15 Check if personal funds were deposited into political account (See Instructions) 16 GUARANTOR INFORMATION 17 Name of guarantor 19 Amount Guaranteed (\$) 18 Guarantor address; City; State; Zip Code 2ip Code 19 Amount Guaranteed (\$)	2 FILER NAME Georgetown Are	a Republican Women PAC					Filers)
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code 10 Interest Rate 12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) 11 Maturity Date 14 Description of Collateral 15 Check if personal funds were deposited into political account (See Instructions) 16 GUARANTOR INFORMATION 17 Name of guarantor 19 Amount Guaranteed (\$) 18 Guarantor address; City; State; Zip Code 19 Amount Guaranteed (\$)	⁴ TOTAL OF UN	IITEMIZED LOANS				\$	0.00
financial institution? Image: Ima	5 Date of loan	7 Name of lender	⊱of-state PA	C (ID#:)	9 Loan Amount (\$)	
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) 14 Description of Collateral None 15 Check if personal funds were deposited into political account (See Instructions) 16 GUARANTOR INFORMATION INFORMATION 17 Name of guarantor 18 Guarantor address; City; State; Zip Code 2 ip Code	financial	8 Lender address; City;	State;	Zip Code			
14 Description of Collateral None 15 Check if personal funds were deposited into political account (See Instructions) 16 GUARANTOR INFORMATION INFORMATION INFORMATION INFORMATION IN NOT Applicable 17 Name of guarantor 18 Guarantor address; City; State; Zip Code						11 Maturity Date	
None (See Instructions) 16 GUARANTOR INFORMATION 17 Name of guarantor 19 Amount Guaranteed (\$) not applicable 18 Guarantor address; City; State; Zip Code Zip Code	12 Principal occupation	on / Job title (See Instructions)		13 Employer (See Instructions)		
INFORMATION Inot applicable I8 Guarantor address; City; State; Zip Code		lateral		15 Check if personal funds we	re deposited		
	16 GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guarante	eed (\$)
20 Principal occupation 21 Employer (See Instructions)	not applicable	18 Guarantor address; City;	State;	Zip Code			
20 Principal occupation 21 Employer (See Instructions)							
	20 Principal occupation	D D D		21 Employer (See Instructions)	<u> </u>	

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ntal Expense Transportation Equipment & Related Expense Travel in District Travel Out of District tract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 1/7 Rpt: 25/31	Georgetown Area Republican Women PAC	00054333			
4 Date	5 Payee name				
11/11/2024	A Matter of Taste				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$135.31	4230 Williams Dr				
Expenditure from corporate funds	Georgetown, TX 78628				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	scription			
OF EXPENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		onation made in honor of Gwen Hodges, 2005-			
		06 GARW President			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought H	Office held			
Date	Payee name				
12/02/2024	Abilene Christian University				
Amount (\$)	Payee address; City; State; Zip Code				
\$1,000.00	ACU Box 27940				
Expenditure from corporate funds	Abilene, TX 79699				
PURPOSE OF EXPENDITURE	Gift/Awards/Memorials Expense	scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Idrey McDonald Scholarship Award			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			
Date	Payee name				
11/15/2024	Amazon.com				
Amount (\$)	Payee address; City; State; Zip Code				
\$276.19	PO Box 81226				
Expenditure from corporate funds	Seattle, WA 98108				
PURPOSE OF EXPENDITURE	Gift/Awards/Memorials Expense	Scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense eracy			
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			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1 Total names Schedule F1:	1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission File)					
Sch: 2/7 Rpt: 26/31	Georgetown Area Republican Women PAC		00054333			
4 Date 11/16/2024	5 Payee name Amazon.com					
6 Amount (\$) \$12.20	7 Payee address; City; State; Zip Co PO Box 81226	e				
Expenditure from corporate funds	Seattle, WA 98108					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		side of Texas. Complete Schedule T. X, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	jht	Office held			
Date	Payee name					
12/17/2024	Constant Contact					
Amount (\$) \$41.50	Payee address; City; State; Zip Co 1601 Trapelo Road, Suite 329	e				
Expenditure from corporate funds	Waltham, MA 02451					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		side of Texas. Complete Schedule T. X, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	jht	Office held			
Date	Payee name					
11/12/2024	GTX Awards and Engraving					
Amount (\$) \$47.63	Payee address; City; State; Zip Co 202 South Austin Avenue Suite 104	Je				
Expenditure from corporate funds	Georgetown, TX 78626					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Nametags		side of Texas. Complete Schedule T. X, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	yht	Office held			

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: 3/7 Rpt: 27/31	Georgetown Area Republican Women PAC 00054333					
4 Date	5 Payee name					
12/12/2024	GTX Awards and Engraving					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$23.82						
Expenditure from corporate funds	Georgetown, TX 78626					
8 PURPOSE OF EXPENDITURE	Nametan					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
11/21/2024	Georgetown Chamber of Commerce					
Amount (\$)	Payee address; City; State; Zip Code					
\$700.00	1 Chamber Way					
Expenditure from corporate funds	Georgetown, TX 78626					
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 Conference Room Rental 					
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					
12/19/2024	Georgetown Chamber of Commerce					
Amount (\$)	Payee address; City; State; Zip Code					
\$350.00	1 Chamber Way					
Expenditure from corporate funds	Georgetown, TX 78626					
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 Conference Room Rental 					
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/Reinburseme Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense - Gift/Awards/Memorials Expense Printing Expense	se Transportation Equipment & Related Expense Travel in District Travel Out of District r OTHER (enter a category not listed above)			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 4/7 Rpt: 28/31	Georgetown Area Republican Women PAC	00054333			
4 Date	5 Payee name				
12/19/2024	H.E.B.				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$21.26	4500 Williams Dr				
Expenditure from corporate funds	Georgetown, TX 78628				
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE		ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense			
		ates, bowls, utensils			
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	Olive Garden Italian Restaurant				
Amount (\$)	Payee address; City; State; Zip Code				
\$556.43	1401 I-35				
Expenditure from corporate funds	Georgetown, TX 78626				
PURPOSE OF EXPENDITURE		ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			
Date	Payee name				
12/17/2024	PayPal				
Amount (\$)	Payee address; City; State; Zip Code				
\$73.16	2211 N. First St				
Expenditure from corporate funds	San Jose, CA 95131				
PURPOSE OF EXPENDITURE		ו ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense			
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 Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	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	Filer ID (Ethics Commission Filers)				
Sch: 5/7 Rpt: 29/31	Georgetown Area Republican Women PAC	00054333				
4 Date	5 Payee name					
11/21/2024	Pok-e-Jo's					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$832.08						
Expenditure from corporate funds	Georgetown, TX 78626					
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense				
	Catered Lunch					
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	Square, Inc.					
Amount (\$)	Payee address; City; State; Zip Code					
\$100.50	1955 Broadway, Suite 600					
Expenditure from corporate funds	Oakland, CA 94612					
PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office held Office held Office held						
Date	Payee name					
11/11/2024	Sympathy.shop					
Amount (\$)	Payee address; City; State; Zip Code					
\$39.95	1 Batesville Blvd					
Expenditure from corporate funds	Batesville, IN 47006					
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense				
		e in honor of Gwen Hodges, 2005-				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Transportation E Travel in District Travel Out of Dis	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
4 Total pages Schodulo E1:				•		(Ethios Commission Eilers)
1 Total pages Schedule F1: Sch: 6/7 Rpt: 30/31	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Georgetown Area Republican Women PAC 00054333					(Ethics Commission Filers)
4 Date	5 Payee name				•	
10/27/2024	5 Payee name TFRW PAC					
6 Amount (\$)	7 Payee address	; City; Si	tate; Zip Coo	le		
\$25.30	13741 North	Highway 183 Suite J4				
Expenditure from corporate funds	Austin, TX 78	750				
8 PURPOSE	(a) Category (See	Categories listed at the top of thi	s schedule)	b) Description		
OF EXPENDITURE	Fees				outside of Texas. Com	
					n, TX, officeholder living	j expense
				Membership	⊢ees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Office	eholder name	Office soug	ht	Office he	eld
Date	Payee name					
11/30/2024	TFRW PAC					
Amount (\$) Payee address; City; State; Zip Code						
\$20.20 13741 North Highway 183 Suite J4						
Expenditure from corporate funds	Austin, TX 78	750				
PURPOSE OF EXPENDITURE	(a) Category _{(See} Fees	Categories listed at the top of thi	s schedule)	Check if Austin	outside of Texas. Com n, TX, officeholder living Service Charg	, expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Office	eholder name	Office soug	ht	Office he	eld
Date Pavee name						
11/30/2024	Payee name TFRW PAC					
				-		
Amount (\$)	Payee address		tate; Zip Coo	le		
\$404.80	13741 North	Highway 183 Suite J4				
Expenditure from corporate funds	Austin, TX 78	750				
PURPOSE	(a) Category (See	Categories listed at the top of thi	s schedule)	b) Description		
OF EXPENDITURE	Membership	Dues			outside of Texas. Com	
					n, TX, officeholder living) expense
				Membership	Dues	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Office	eholder name	Office soug	ht	Office he	eld