

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) 00054176	2 Total pages filed: 48
3 COMMITTEE NAME Fayette County Republican Women		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 01/15/2025	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 744 La Grange, TX 78945		
	5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Patricia Diane NICKNAME LAST Petras	MI SUFFIX
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7331 Mueller Rd. La Grange, TX 78945		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7331 Mueller Rd. La Grange, TX 78945		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (409) 782-0879		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/01/2024 12/31/2024		
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Fayette County Republican Women	13 Filer ID (Ethics Commission Filers) 00054176
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 11,340.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 15,569.94
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 13,238.82
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.

Patricia Diane Petras

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 Fayette County Republican Women		18 Filer ID (Ethics Commission Filers) 00054176
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 11,340.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 15,569.94
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input 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: 1/32 Rpt: 4/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYERS, TOM <hr/> 6 Contributor address; City; State; Zip Code LA GRANGE, TX 78945	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appelt, Barbara (Mrs.) <hr/> Contributor address; City; State; Zip Code Schulenburg, TX 78956	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appelt, Barbara (Mrs.) <hr/> Contributor address; City; State; Zip Code Schulenburg, TX 78956	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appelt, Barbara (Mrs.) <hr/> Contributor address; City; State; Zip Code Schulenburg, TX 78956	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appelt, Barbara (Mrs.) <hr/> Contributor address; City; State; Zip Code Schulenburg, TX 78956	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/32 Rpt: 5/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appelt, Barbara (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Schulenburg, TX 78956	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atwood, Carmela (Mrs.) <hr/> Contributor address; City; State; Zip Code Fayetteville, TX 78940-5247	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atwood, Carmela (Mrs.) <hr/> Contributor address; City; State; Zip Code Fayetteville, TX 78940-5247	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atwood, Dan <hr/> Contributor address; City; State; Zip Code Fayetteville, FL 78940	Amount of Contribution (\$) \$20.00
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#: _____) Bayer, Delores (Mrs.) <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/32 Rpt: 6/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benbenek, Pam <hr/> 6 Contributor address; City; State; Zip Code La Grange, TX 78945	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benbenek, Pam <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berger, Rebecca (Mrs.) <hr/> Contributor address; City; State; Zip Code Schulenburg, TX 78956	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernsen, Brianne (Mrs.) <hr/> Contributor address; City; State; Zip Code Plum, TX 78952	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernsen, Brianne (Mrs.) <hr/> Contributor address; City; State; Zip Code Plum, TX 78952	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/32 Rpt: 7/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blythe, Anna <hr/> 6 Contributor address; City; State; Zip Code Weimar, TX 78962	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bourlon, Carole (Mrs.) <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bourlon, Carole (Mrs.) <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowman, Steve <hr/> Contributor address; City; State; Zip Code Flatonia, TX 78941	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowman, Steve <hr/> Contributor address; City; State; Zip Code Flatonia, TX 78941	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/32 Rpt: 8/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowman, Steve <hr/> 6 Contributor address; City; State; Zip Code Flatonia, TX 78941	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Pastor		9 Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bretz, Savannah <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patricia <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briggs, Gina <hr/> Contributor address; City; State; Zip Code Cat Spring, TX 78933	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brisgill, Peggy (Mrs.) <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/32 Rpt: 9/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brisgill, Peggy (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code La Grange, TX 78945	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brumback, Ellen <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brumback, Ellen <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brumback, Ellen <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brumback, Wayne (Mr.) <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/32 Rpt: 10/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bull, Sara (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Columbus, TX 78934	
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Homemaker
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bullard, Kathryn	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Schulenburg, TX 78956	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bullard, Kathryn	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Schulenburg, TX 78956	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burger, Jeannette (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Round Top, TX 78954	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Round Top Real Estate
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Billie (Mrs.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/32 Rpt: 11/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cerny, Robin	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Flatonia, TX 78941	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cerny, Robin	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code Flatonia, TX 78941	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chorens, Cathy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Damon, Debby	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Columbus, TX 78934	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Mary (Mrs.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code La grange, TX 78945	
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: 9/32 Rpt: 12/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennis, Lisa (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Schulenburg, TX 78956	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dernehl, Rita (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dernehl, Rita (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dippel, Darryl (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downey, Wren	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/32 Rpt: 13/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downey, Wren <hr/> 6 Contributor address; City; State; Zip Code La Grange, TX 78945	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eguizabal, Debra (Mrs.) <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eguizabal, Debra (Mrs.) <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eguizabal, Debra (Mrs.) <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eguizabal, Debra (Mrs.) <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/32 Rpt: 14/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Suzanne (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Roundtop, TX 78954	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eppers, Dawn <hr/> Contributor address; City; State; Zip Code Bryan, TX 77803	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fayette County Republican Party <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felder, Roy (Mr.) <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzpatrick, Christyna <hr/> Contributor address; City; State; Zip Code Schulenburg, TX 78956	Amount of Contribution (\$) \$60.00
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: 12/32 Rpt: 15/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 09/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fixpatricks Garage <hr/> 6 Contributor address; City; State; Zip Code Schulenburg, TX 78956	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Deborah (Mrs.) <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Deborah (Mrs.) <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garmoe, Kim <hr/> Contributor address; City; State; Zip Code Weimar, TX 78962	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garmoe, Kim <hr/> Contributor address; City; State; Zip Code Weimar, TX 78962	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/32 Rpt: 16/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gatlin, Linda (Mrs.)	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code La Grange, TX 78945		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gatlin, Linda (Mrs.)	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gatlin, Linda (Mrs.)	Amount of Contribution (\$) \$80.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geesaman, Dennis (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Flatonia, TX 78941		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geesaman, Kathryn (Mrs.)	Amount of Contribution (\$) \$650.00
Contributor address; City; State; Zip Code Flatonia, TX 78941		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/32 Rpt: 17/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geesaman, Kathryn (Mrs.)	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Flatonia, TX 78941		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geesaman, Kathryn (Mrs.)	Amount of Contribution (\$) \$80.00
Contributor address; City; State; Zip Code Flatonia, TX 78941		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Dolores	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
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#: _____) Harker, Jackie	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Flatonia, TX 78941		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hass, Jesyca Robyn (Mrs.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
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: 15/32 Rpt: 18/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hass, Jesyca Robyn (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code La Grange, TX 78945	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hass, Joseph (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Head, Jacquelyn (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hefner, Terri	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Flatonia, TX 78941	
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#: _____) Herbrich, James	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) District Atty		Employer (See Instructions) Fayette County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/32 Rpt: 19/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herbrich, Shannon	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code La Grange, TX 78945		
8 Principal occupation / Job title (See Instructions) Housewife		9 Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holub, Kelly (Mrs.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) HIM Coder		Employer (See Instructions) Baylor Scott & White
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holub, Kelly (Mrs.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) HIM Coder		Employer (See Instructions) Baylor Scott & White
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holub, Kelly (Mrs.)	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) HIM Coder		Employer (See Instructions) Baylor Scott & White
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holub, Kelly (Mrs.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) HIM Coder		Employer (See Instructions) Baylor Scott & White

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/32 Rpt: 20/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooper, Sandra	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code La Grange, TX 78945	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooper, Sandra	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howse, Carol (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) Self
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howse, James (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) Self
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jameson, Joe	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code La Grange, TX 78945	
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: 18/32 Rpt: 21/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joost, Glenda	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code West Point, TX 78963		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joost, Glenda	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code West Point, TX 78963		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joost, Glenda	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code West Point, TX 78963		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joost, Glenda	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code West Point, TX 78963		
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#: _____) Joost, Glenda	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code West Point, TX 78963		
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: 19/32 Rpt: 22/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyner, Chuck <hr/> 6 Contributor address; City; State; Zip Code La Grange, TX 78945	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laguarta, Julie <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laguarta, Julie <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$40.00
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#: _____) Leer, Becky (Mrs.) <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leidy, Kaye <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/32 Rpt: 23/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Littrell, Sherrie	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code La Grange, TX 78945		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Marilyn	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Ledbetter, TX 78946		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Marilyn	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Ledbetter, TX 78946		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maschmeyer, DONALD (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maschmeyer, DONALD (Mr.)	Amount of Contribution (\$) \$80.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/32 Rpt: 24/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maschmeyer, Marciel (Mrs.) 6 Contributor address; City; State; Zip Code La Grange, TX 78945	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maschmeyer, Marciel (Mrs.) Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McHenry, Jean (Ms.) Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McHenry, Jean (Ms.) Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mican, Jeannie Contributor address; City; State; Zip Code Schulenburg, TX 78956	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Admin Assist		Employer (See Instructions) St Rose Catholic Church

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/32 Rpt: 25/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minnich, Sherrie <hr/> 6 Contributor address; City; State; Zip Code Schulenberg, TX 78956	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moncrief, Susan (Mrs.) <hr/> Contributor address; City; State; Zip Code Flatonia, TX 78941	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreau, Craig (Mr.) <hr/> Contributor address; City; State; Zip Code Round Top, TX 78954	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Houston
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Musick, Lisa <hr/> Contributor address; City; State; Zip Code Flatonia, TX 78941	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neal, Jeanne <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/32 Rpt: 26/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padilla, Marsha	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code La Grange, TX 78945		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Patsy (Mrs.)	Amount of Contribution (\$) \$90.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Patsy (Mrs.)	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Patsy (Mrs.)	Amount of Contribution (\$) \$108.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Patsy (Mrs.)	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/32 Rpt: 27/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Patsy (Mrs.)	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code La Grange, TX 78945	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parry, Elizabeth	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Fayetteville, TX 78940	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petras, Diane (Mrs.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Plant Controller		Employer (See Instructions) Arkema
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petras, Diane (Mrs.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Plant Controller		Employer (See Instructions) Arkema
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petras, Diane (Mrs.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Plant Controller		Employer (See Instructions) Arkema

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/32 Rpt: 28/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 09/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petras, Diane (Mrs.)	7 Amount of Contribution (\$) \$792.00
6 Contributor address; City; State; Zip Code La Grange, TX 78945		
8 Principal occupation / Job title (See Instructions) Plant Controller		9 Employer (See Instructions) Arkema
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petras, Diane (Mrs.)	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Plant Controller		Employer (See Instructions) Arkema
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petras, Diane (Mrs.)	Amount of Contribution (\$) \$80.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Plant Controller		Employer (See Instructions) Arkema
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petras, Diane (Mrs.)	Amount of Contribution (\$) \$80.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Plant Controller		Employer (See Instructions) Arkema
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petras, Diane (Mrs.)	Amount of Contribution (\$) \$400.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Plant Controller		Employer (See Instructions) Arkema

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/32 Rpt: 29/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petras, Diane (Mrs.)	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code La Grange, TX 78945		
8 Principal occupation / Job title (See Instructions) Plant Controller		9 Employer (See Instructions) Arkema
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petras, Diane (Mrs.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Plant Controller		Employer (See Instructions) Arkema
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petras, Diane (Mrs.)	Amount of Contribution (\$) \$80.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Plant Controller		Employer (See Instructions) Arkema
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Rynie	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Muldoon, TX 78949		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodibaugh, Cindy (Mrs.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Flatonia, TX 78941		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/32 Rpt: 30/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodibaugh, Cindy (Mrs.)	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code Flatonia, TX 78941		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodibaugh, Cindy (Mrs.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Flatonia, TX 78941		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodibaugh, Cindy (Mrs.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Flatonia, TX 78941		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutledge, Kimberley (Mrs.)	Amount of Contribution (\$) \$80.00
Contributor address; City; State; Zip Code Smithville, TX 78957		
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) Self
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutledge, Kimberley (Mrs.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Smithville, TX 78957		
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/32 Rpt: 31/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sacco, Connie (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code La Grange, TX 78945	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sacco, Connie (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaefer, Jean	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Schulenberg, TX 78956	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlabach, Michael (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Ellinger, TX 78938	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) MAD Taxidermy
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Allison	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code La Grange, TX 78945	
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: 29/32 Rpt: 32/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kristina	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code weimar, TX 78962		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) St Cyr, Marlaime	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code La Grange, TX 78945		
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#: _____) Stall, David (Mr.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Fayetteville, TX 78940		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stall, Linda (Mrs.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Fayetteville, TX 78940		
Principal occupation / Job title (See Instructions) ESCROW OFFICER		Employer (See Instructions) BOTTTS TITLE
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TFRW	Amount of Contribution (\$) \$400.00
Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/32 Rpt: 33/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLBERT, SHERRIE (Ms.) <hr/> 6 Contributor address; City; State; Zip Code FAYETTEVILLE, TX 78940	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLBERT, SHERRIE (Ms.) <hr/> Contributor address; City; State; Zip Code FAYETTEVILLE, TX 78940	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLBERT, SHERRIE (Ms.) <hr/> Contributor address; City; State; Zip Code FAYETTEVILLE, TX 78940	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terronez, Sherrie <hr/> Contributor address; City; State; Zip Code Schulenburg, TX 78956	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terronez, Sherrie <hr/> Contributor address; City; State; Zip Code Schulenburg, TX 78956	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/32 Rpt: 34/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terronez, Sherrie	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Schulenburg, TX 78956	
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#: _____) Thompson, LaMorris (Mrs.)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Schulenburg, TX 78956	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, LaMorris (Mrs.)	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code Schulenburg, TX 78956	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tofel, Denise	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingo, Cindy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Schulenberg, TX 78956	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/32 Rpt: 35/48
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingo, Cindy	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code Schulenberg, TX 78956		
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Self
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingo, Cindy	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Schulenberg, TX 78956		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yost, Rollyn	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Katy, TX 77493		
Principal occupation / Job title (See Instructions) Realtor		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: 1/13 Rpt: 36/48	2 FILER NAME Fayette County Republican Women	3 Filer ID (Ethics Commission Filers) 00054176
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4 Date 07/01/2024	5 Payee name Club Express
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6 Amount (\$) \$36.96 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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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 Monthly hosting fees for Website
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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 08/02/2024	Payee name Club Express
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Amount (\$) \$36.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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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 Monthly hosting fees for Website
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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 09/03/2024	Payee name Club Express
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Amount (\$) \$37.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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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 Monthly hosting fees for website
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/13 Rpt: 37/48	2 FILER NAME Fayette County Republican Women	3 Filer ID (Ethics Commission Filers) 00054176
4 Date 10/01/2024	5 Payee name Club Express	
6 Amount (\$) \$42.42 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173	
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 Monthly hosting fees for Website
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/01/2024	Payee name Club Express	
Amount (\$) \$44.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173	
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 Monthly hosting fees for website
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Club Express	
Amount (\$) \$46.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173	
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 Monthly hosting fees for website
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: 3/13 Rpt: 38/48	2 FILER NAME Fayette County Republican Women	3 Filer ID (Ethics Commission Filers) 00054176
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4 Date 12/12/2024	5 Payee name Club Express
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6 Amount (\$) \$43.56 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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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 Monthly hosting fees for website
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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 12/12/2024	Payee name Club Express
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Amount (\$) \$43.56 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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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 Monthly hosting fees for website (duplicated)
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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 12/31/2024	Payee name Club Express
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Amount (\$) \$48.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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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 Monthly Hosting Fees for website
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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: 4/13 Rpt: 39/48	2 FILER NAME Fayette County Republican Women	3 Filer ID (Ethics Commission Filers) 00054176
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4 Date 08/01/2024	5 Payee name Club Express
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6 Amount (\$) \$35.59 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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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 Processing Fees Withheld from Deposit
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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 08/21/2024	Payee name Club Express
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Amount (\$) \$6.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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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 Processing fees withheld from deposit
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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 09/03/2024	Payee name Club Express
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Amount (\$) \$4.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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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 Processing Fees withheld from Deposit
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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: 5/13 Rpt: 40/48	2 FILER NAME Fayette County Republican Women	3 Filer ID (Ethics Commission Filers) 00054176
4 Date 10/11/2024	5 Payee name Club Express	
6 Amount (\$) \$1.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173	
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 Processing Fees withheld from Deposit
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/12/2024	Payee name Club Express	
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173	
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 Processing Fees withheld from Deposit
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2024	Payee name Club Express	
Amount (\$) \$7.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173	
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 Processing Fees withheld from Deposit
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: 6/13 Rpt: 41/48	2 FILER NAME Fayette County Republican Women	3 Filer ID (Ethics Commission Filers) 00054176
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4 Date 12/02/2024	5 Payee name Club Express
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6 Amount (\$) \$13.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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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 Processing Fees withheld from deposit
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/08/2024	Payee name David Schenck Campaign
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O Box 130001 Dallas, TX 75313
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to campaign
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/18/2024	Payee name Frank, Deborah (Mrs.)
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Amount (\$) \$232.69 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1020 Konezke Lane La Grange, TX 78945
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cards w/envelopes
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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: 7/13 Rpt: 42/48	2 FILER NAME Fayette County Republican Women	3 Filer ID (Ethics Commission Filers) 00054176
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4 Date 11/16/2024	5 Payee name Frank, Deborah (Mrs.)
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6 Amount (\$) \$84.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1020 Konetzke Lane La Grange, TX 78945
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing copies
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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 09/18/2024	Payee name Frisch Auf Valley Country Club
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Amount (\$) \$639.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 575 Country Club Drive La Grange, TX 78945
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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 Monthly luncheon
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/16/2024	Payee name Frisch Auf Valley Country Club
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Amount (\$) \$548.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 575 Country Club Drive La Grange, TX 78945
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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 Monthly Luncheon
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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: 8/13 Rpt: 43/48	2 FILER NAME Fayette County Republican Women	3 Filer ID (Ethics Commission Filers) 00054176
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4 Date 11/20/2024	5 Payee name Frisch Auf Valley Country Club
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6 Amount (\$) \$662.34 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 575 Country Club Drive La Grange, TX 78945
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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 Monthly luncheon
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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 12/07/2024	Payee name Frisch Auf Valley Country Club
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Amount (\$) \$2,353.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 575 Country Club Drive La Grange, TX 78945
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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 Christmas party dinner
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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 09/08/2024	Payee name Gina Parker Campaign
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5015 Fort Ave Waco, TX 76710
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to campaign
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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: 9/13 Rpt: 44/48	2 FILER NAME Fayette County Republican Women	3 Filer ID (Ethics Commission Filers) 00054176
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4 Date 09/08/2024	5 Payee name Jimmy Blacklock Campaign
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6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P O Box 1588 Austin, TX 78767
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Campaign
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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 09/08/2024	Payee name Judge John Devine Campaign
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to campaign
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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 09/08/2024	Payee name Justice Jane Bland Campaign
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1005 Congress Ave #400 Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to campaign
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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: 10/13 Rpt: 45/48	2 FILER NAME Fayette County Republican Women	3 Filer ID (Ethics Commission Filers) 00054176
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4 Date 09/08/2024	5 Payee name Lee Finley Campaign
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6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1818 Waterford Lane Richardson, TX 75082
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to campaign
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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 08/23/2024	Payee name Libby's Kitchen & Studio
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Amount (\$) \$876.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 144 E Guadalupe St La Grange, TX 78945
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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 Box lunches for Book Study
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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 08/14/2024	Payee name Parker, Patsy
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Amount (\$) \$143.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1407 E Radhost School La Grange, TX 78945
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Library Books
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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: 11/13 Rpt: 46/48	2 FILER NAME Fayette County Republican Women	3 Filer ID (Ethics Commission Filers) 00054176
4 Date 09/18/2024	5 Payee name Parker, Patsy	
6 Amount (\$) \$1,248.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1407 E Radhost School La Grange, TX 78945	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dictionaries
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/09/2024	Payee name Recover America	
Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 15311 Vantage Pkwy West Ste 315 Houston, TX 77032	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation for Book Study Event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2024	Payee name Round Top Historical Society	
Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 307 E Mill St Round Top, TX 78954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation for luncheon/use of the pavilion
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: 12/13 Rpt: 47/48	2 FILER NAME Fayette County Republican Women	3 Filer ID (Ethics Commission Filers) 00054176
4 Date 08/26/2024	5 Payee name SignAd	
6 Amount (\$) \$3,450.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P O Box 8626 Houston, TX 77249	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Election sign on Hwy. 71
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name TFRW	
Amount (\$) \$1,420.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O Box 171146 Austin, TX 78717	
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 56*25+20
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2024	Payee name Wingo, Cindy	
Amount (\$) \$83.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 College Schulenburg, TX 78956	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW ticket for Rita Dernehl Tribute for Women
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: 13/13 Rpt: 48/48	2 FILER NAME Fayette County Republican Women	3 Filer ID (Ethics Commission Filers) 00054176	
4 Date 09/08/2024	5 Payee name Wingo, Cindy		
6 Amount (\$) \$25.33 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 609 College Schulenburg, TX 78956		
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 Color copies for Book Study	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held