FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00017092 3 COMMITTEE NAME **OFFICE USE ONLY** Preston West Republican Women PAC Date Received **ELECTRONICALLY FILED** 01/14/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 4407 Hallmark Dr. Date Hand-delivered or Date Postmarked Change of Address Dallas, TX 75229 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Valerie E. NAME NICKNAME LAST **SUFFIX** Ertz STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 4407 Hallmark Dr. STREET **ADDRESS** (Residence or Business) Dallas, TX 75229 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** Ste. 660 #193 MAILING **ADDRESS** 11700 Preston Rd. Dallas, TX 75230 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 435-3588 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 10/27/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/03/2026 General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME	2 COMMITTEE NAME			(Ethics Commission Filers)
		00017092		
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	3,835.73
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	3,835.73
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	2,496.05
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST IS G PERIOD	DAY \$	10,343.66
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Ms. Vale	rie E. Ertz	
		Signature of Car	npaign Treasu	rer
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ed before me, by the said	, tr	is 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 office	er administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

					3 of 9
17 CO	MMITTE	E NAME	18 Filer ID	(Ethics Commissi	on Filers)
Preston West Republican Women PAC 00017092					
		E SUBTOTALS			
NAME OF SCHEDULE			SUBTOTAL	AMOUNT	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	3,835.73
2.	П	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	П	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
				ļ	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	R	\$	
ļ ⁻ .	Ш	ORGANIZATION		Φ	
		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	TION OR		
5.	Ш	LABOR ORGANIZATION		\$	
6.	Ш	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
		COLIEDURE CA. MONEMARY CURRORT FROM CORRORATION OR LABOR			
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.	П	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.	П	SCHEDULE E: LOANS		\$	
	<u> </u>			Ψ	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	2	\$	2,496.05
10.		SCHEDOLETT. FOLITICAL EXPENDITORES FROM FOLITICAL CONTRIBUTIONS	5) D	2,490.03
44		COLUED HILE FOR LINIDAID INICIADED OR LOATIONS			
11.	Ш	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	Ш	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
				+	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
				-	
15.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	20.59
		10 FILER			
l					
ı					

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 Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (other a cottographed listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Takal manage Calandula Edu	
1 Total pages Schedule F1:	
Sch: 1/5 Rpt: 4/9	Preston West Republican Women PAC 00017092
4 Date	5 Payee name
12/26/2024	Blakely , Vicki
	·
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$48.76	16831 Village Lane
Expenditure from	Dellas TV 75240
corporate funds	Dallas, TX 75248
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Invitations
9 Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experiantic to belieff 6/6	
Date	Payee name
11/23/2024	Constant Contact
11/23/2024	
Amount (\$)	Payee address; City; State; Zip Code
\$43.71	1601 Trapelo RD
Expenditure from	
corporate funds	Waltham , MA 02451
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Email Service Vendor
On marelanta ONIII V if alima at	On all data (Office health a grown of the second to the se
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experiantire to benefit 6/6	
Date	Payee name
12/23/2024	Constant Contact
12/23/2024	
Amount (\$)	Payee address; City; State; Zip Code
\$43.71	1601 Trapelo RD
Expenditure from	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
corporate funds	Waltham , MA 02451
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Email Service Vendor
Complete ONLY if alice -t	Candidate/Officeholder name Office cought
Complete <u>ONLY</u> if direct expenditure to benefit C/O	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)

Credit Card F dyment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/5 Rpt: 5/9	Preston West Republican Women PAC	00017092
4 Date	5 Payee name	
12/16/2024	Forte, Marty	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$120.00	4309 Alta Vista Lane	
E consider on finance		
Expenditure from corporate funds	Dallas, TX 75229	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Event Gratuity
		Livent Gratary
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	aht Office held
expenditure to benefit C/OI		giit Silico Hola
Data		
Date	Payee name	
12/04/2024	Smith, Van (Mrs.)	
Amount (\$)	Payee address; City; State; Zip Co	de
\$40.00	14342 Valley Hi Circle	
Expenditure from		
corporate funds	Farmers Branch, TX 75234	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Event Expense - Gratuity
		Event Expense Cratary
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht Office held
expenditure to benefit C/OI	•	g Coc Hold
Date	Payes name	
12/04/2024	Payee name Smith, Van (Mrs.)	
Amount (\$)	Payee address; City; State; Zip Co	de
\$16.22	14342 Valley Hi Circle	
Expenditure from		
corporate funds	Farmers Branch, TX 75234	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Party Supplies
		Tarry Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI		Gille Held

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

Credit Card Payment	The Instruction Guide explains how to con	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/5 Rpt: 6/9	Preston West Republican Women PAC	00017092
4 Date	5 Payee name	<u>'</u>
12/04/2024	Smith, Van (Mrs.)	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	e
\$10.82	14342 Valley Hi Circle	
Expenditure from corporate funds	Farmers Branch, TX 75234	
8 PURPOSE	1	b) Description
OF	(a) Category (See Categories listed at the top of this schedule) Event Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht Office held
experialiture to benefit C/O	'	
Date	Payee name	
12/31/2024	Stripe	
Amount (\$)	Payee address; City; State; Zip Coo	e
\$32.64	354 Oyster Point Blvd.	
Expenditure from corporate funds	South San Francisco , CA 94080	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Processing Fees
Complete ONLY if direct	Candidate/Officeholder name Office souc	ht Office held
expenditure to benefit C/O	<u> </u>	nt Office field
Date	Payee name	
12/26/2024	Theilen, Ellen	
Amount (\$)	Payee address; City; State; Zip Coo	e
\$15.00	12935 Epps Field Rd	
Expenditure from		
corporate funds	Farmers Branch, TX 75234	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Speaker's Dinner
		-p-38.0. 0 2
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/O		

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

Credit Card Payment	The Instruction Guide explains how to con	nplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Con	nmission Filers)
Sch: 4/5 Rpt: 7/9	Preston West Republican Women PAC		00017092	
4 Date	5 Payee name		I	
12/26/2024	Theilen, Ellen			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$12.96	12935 Epps Field Rd			
Expenditure from corporate funds	Farmers Branch, TX 75234			
8 PURPOSE	<u> </u>	(b) Description		
OF	(a) Category (See Categories listed at the top of this schedule) Event Expense	_	l outside of Texas. Complete Schedule	т.
EXPENDITURE		ш	n, TX, officeholder living expense	
		Party Suppli	es	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held	
experientare to benefit e/of	<u>'</u>			
Date	Payee name			
12/04/2024	Theilen, Ellen			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$50.00	12935 Epps Field Rd			
Expenditure from corporate funds	Farmers Branch, TX 75234			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Gift/Awards/Memorials Expense	ш	l outside of Texas. Complete Schedule	T.
EXI ENDITORE		ш	n, TX, officeholder living expense	
		Speaker's G	ift - Reimbursement	
Complete ONLY if direct	Candidate/Officeholder name Office sour	vht	Office held	
expenditure to benefit C/O	•	Jiit	Office field	
Date	Payee name			
12/26/2024	Theilen, Ellen			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$100.00	12935 Epps Field Rd			
Expenditure from				
corporate funds	Farmers Branch, TX 75234			
PURPOSE OF	,	(b) Description		_
EXPENDITURE	Gift/Awards/Memorials Expense		I outside of Texas. Complete Schedule n, TX, officeholder living expense	Т.
		ш	t - Reimbursement	
		,		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held	
expenditure to benefit C/O		•		

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District y - Gift/Awards/Memorials Expense Printing Expense Travel out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/5 Rpt: 8/9	Preston West Republican Women PAC 00017092
4 Date	5 Payee name
12/11/2024	Victoria Restaurant
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,962.23	13434 Bee St.
Expenditure from corporate funds	Farmers Branch, TX 75235
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Christmas Party
	Chilistinas i arty
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 9/9 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Preston West Republican Women PAC 00017092 8 Amount (\$) 5 Name of person from whom amount is received 12/31/2024 \$20.59 North Dallas Bank & Trust Co. 6 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75367 Purpose for which amount is received Check if political contribution returned to filer **Earned Interest**