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) 00058757 3 COMMITTEE NAME **OFFICE USE ONLY** Cy-Fair Republican Women PAC Date Received **ELECTRONICALLY FILED** 01/16/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 8524 Hwy 6 North #550 Date Hand-delivered or Date Postmarked Change of Address Houston, TX 77095 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Linda NAME NICKNAME LAST **SUFFIX** Zachary STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 8524 HWY 6 North STREET **ADDRESS** #550 (Residence or Business) Houston, TX 77095 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 8524 HWY 6 North MAILING **ADDRESS** #550 Houston, TX 77095 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 543-6263 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 Day Month Day Year Month **COVERED THROUGH** 07/01/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

L2 COMMITTEE NAME Cy-Fair Republican W	Jomen P∆C			13	Filer ID 00058757	(Ethics Commission Filers)
		T				
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ms. Lacy Hull St	ate Representat	ive	
(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				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
L5 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PLEDGES, LOANS, CONTRIBUTIONS M	OR GUARANTE MADE ELECTRO	EES OF LOANS, OR ONICALLY)		\$	150.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBU	TIONS		\$	5,512.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EX	XPENDITURES		\$	0.00
	4. TOTAL POLITICA	AL EXPENDIT	URES		\$	11,158.31
CONTRIBUTION BALANCE	5. TOTAL POLITICAL O		NS MAINTAINED AS	OF THE LAST DA	AY \$	14,017.14
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A			OANS AS OF TH	E \$	0.00
L6 AFFIDAVIT						
		tr		ncludes all informa		accompanying report is d to be reported by me
		_		Mrs. Linda		
			•	Signature of Camp	algn Treasu	irer
AFFIX NOTAR	RY STAMP / SEAL ABOVE					
Sworn to and subscribe	ed before me, by the said			, this	the	day
of	, 20, to certify v	which, witness n	ny hand and seal of o	office.		
Signature of officer a	administering oath	Printed name o	f officer administerin	g oath	Title of office	cer administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 3 of 44

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Cy-Fair Republican Wo	men PAC			00058757	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Dr. Tom Oliverson State	Representative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Mike Schofield State	Representative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Ms. Kay Smith State Rep	presentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	•				

GENERAL-PURPOSE COMMITTEE REPORT:

FORM GPAC ADDENDUM

PURPOSE			ADDENDON
			Page 4 of 44
12 COMMITTEE NAME			13 Filer ID (Ethics Commission Filers)
Cy-Fair Republican Wo	omen PAC		00058757
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. James Lombardino H	arris County Justice of the Peace Pct 5
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted		
	(Identify by name or, if applicable, classify by party.)		

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

		VER OTIEET	5 of 44
17 COMMITTEE NAME Cy-Fair Republican Women PAC	18 Filer ID 00058757	(Ethics Commission	Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AN	MOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	5,512.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$	
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$	
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	ANIZATION	\$	
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	DRGANIZATION	\$	
9. SCHEDULE E: LOANS		\$	
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	11,158.31
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14. X SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	37.13
15. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F	RETURNED	\$	5.41

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1					
	The Instru	ction Guide explains how	to complete this fo	orı	n.	1	Total pages Schedule A1: Sch: 1/27 Rpt: 6/44	
2	FILER NAME Cy-Fair Rep	ublican Women PAC				3	Filer ID (Ethics Commission 00058757	ı Filers)
4	Date 09/11/2024	5 Full name of contributor Amani, Neda (Dr.)6 Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	7	Amount of Contribution (\$)	\$27.00
8	Principal occu Physician	Houston, TX 77030 pation / Job title (See Instructions)	9	Employer (See Instructions self	<u> </u> s)		
	Date 12/09/2024	Full name of contributor Amani, Neda (Dr.) Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	•	Amount of Contribution (\$)	\$52.00
	Principal occu Physician	Houston, TX 77030 pation / Job title (See Instructions)		Employer (See Instructions self	<u> </u> s)		
	Date 09/11/2024	Full name of contributor Baker, Renee Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	•	Amount of Contribution (\$)	\$27.00
		Houston, TX 77095			_			
	Real Estate	pation / Job title (See Instructions Broker	·)		Employer (See Instructions self	S)		
Date 09/12/2024		Full name of contributor Baker, Renee Contributor address; City; St Houston, TX 77095	out-of-state PAC (ID#:_ ate; Zip Code)	•	Amount of Contribution (\$)	\$25.00
	Principal occu Real Estate	pation / Job title (See Instructions)		Employer (See Instructions self	<u> </u> s)		
	Date 10/09/2024	Full name of contributor Baker, Renee Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu Real Estate	pation / Job title (See Instructions Broker)		Employer (See Instructions self	s)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDULE	■ A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/27 Rpt: 7/44	
2	FILER NAME Cy-Fair Repu	ublican Women PAC			3	Filer ID (Ethics Commission 00058757	Filers)
4	Date 08/29/2024	5 Full name of contributor Barker, Howard 6 Contributor address; City; Sta			7	Amount of Contribution (\$)	\$50.00
_		Waller , TX 77484			<u> </u>		
8	Principal occu Retired	pation / Job title (See Instructions)	!	9 Employer (See Instructions	5)		
	Date 12/23/2024	Full name of contributor Barker, Howard Contributor address; City; Sta)		Amount of Contribution (\$)	\$50.00
		Waller , TX 77484 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 08/26/2024	Full name of contributor Davis, Suzanne Contributor address; City; Sta Houston, TX 77064	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$45.00
	Principal occu Stager/Paint	pation / Job title (See Instructions)		Employer (See Instructions self	<u> </u>		
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$30.00	
	Principal occu Stager/Paint	Houston, TX 77064 pation / Job title (See Instructions) er		Employer (See Instructions self	<u> </u>		
	Date 09/12/2024	Full name of contributor [Davis, Suzanne Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Stager/Paint	pation / Job title (See Instructions) er		Employer (See Instructions self	s)		

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 3/27 Rpt: 8/44	
2	FILER NAME Cy-Fair Repu	ublican Women PAC			3	Filer ID (Ethics Commission 00058757	n Filers)
4	Date 10/09/2024	 5 Full name of contributor Davis, Suzanne 6 Contributor address; City; State;)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Houston, TX 77064 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
	Stager/Paint			self	,		
	Date 11/13/2024	Davis, Suzanne Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$40.00
	Principal occu	Houston, TX 77064 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
			self	,			
	Date 11/13/2024	Full name of contributor Davis, Suzanne Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
		Houston, TX 77064					
	Principal occu Stager/Paint	pation / Job title (See Instructions) er		Employer (See Instructions self	5)		
	Date 12/13/2024	Full name of contributor Davis, Suzanne Contributor address; City; State; I)		Amount of Contribution (\$)	\$250.00
	Principal occu Stager/Paint	pation / Job title (See Instructions) er		Employer (See Instructions self	5)		
	Date 12/13/2024	Full name of contributor Draughon, Susan (Mrs.) Contributor address; City; State; City; Ci	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$75.00
	Principal occu business ow	pation / Job title (See Instructions) ner		Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTRIB	BUTION	NS		SCHEDUL	E A1
	The Instruc	etion Guide explains how to complete	e this for	m.	1	Total pages Schedule A1: Sch: 4/27 Rpt: 9/44	
2	FILER NAME Cy-Fair Repu	ıblican Women PAC			3	Filer ID (Ethics Commission 00058757	n Filers)
4	Date 09/11/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$6.00
8		TX pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> 5)		
	Date 09/12/2024	Full name of contributor out-of-state F Edwards, DeBra Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.00
	Principal occu	Cypress, TX 77433 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Date 10/09/2024	Full name of contributor out-of-state F Edwards, DeBra Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu	Cypress, TX 77433 pation / Job title (See Instructions)		Employer (See Instructions	 i)		
	Date 11/13/2024	Full name of contributor out-of-state F Edwards, DeBra Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$10.00
	Principal occu	Cypress, TX 77433 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Date 11/21/2024	Full name of contributor out-of-state F Edwards, DeBra Contributor address; City; State; Zip Code Cypress, TX 77433				Amount of Contribution (\$)	\$104.00
	Principal occu Retired	oation / Job title (See Instructions)		Employer (See Instructions	s)		
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	MONET	ARY POLITICAL C	CONTRIBUTIO	NS		SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/27 Rpt: 10/44		
2	FILER NAME Cy-Fair Repu	ublican Women PAC			3	Filer ID (Ethics Commission 00058757	r Filers)	
4	Date 11/21/2024	5 Full name of contributor Edwards, DeBra6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$79.00	
_	5	Cypress, TX 77433	, I		Ĺ			
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	S)			
	Date 08/29/2024	Full name of contributor Foster, Bonnie (Ms.) Contributor address; City; St)		Amount of Contribution (\$)	\$55.00	
	Delicalization	Cypress, TX 77433	, I	Faralassa (Ossalastasstissa	<u> </u>			
	Principal occupation / Job title (See Instructions) sales manager)	Employer (See Instructions Club Sports, Inc.	S)			
	Date 09/12/2024	Full name of contributor Foster, Bonnie (Ms.) Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$30.00	
		Cypress, TX 77433						
	Principal occu sales manag	pation / Job title (See Instructions per)	Employer (See Instructions Club Sports, Inc.	s)			
	Date Full name of contributor out-of-state PAC (IE 10/09/2024 Foster, Bonnie (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00	
	Principal occu sales manag	Cypress, TX 77433 pation / Job title (See Instructions per)	Employer (See Instructions Club Sports, Inc.	<u>l</u> S)			
	Date 11/13/2024	Full name of contributor Foster, Bonnie (Ms.) Contributor address; City; St Cypress, TX 77433	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00	
	Principal occu sales manag	pation / Job title (See Instructions)	Employer (See Instructions Club Sports, Inc.	s)			
		·						

	MONEI	ARY POLITICAL (CONTRIBUTION	NS		SCHEDUL	SCHEDULE A1	
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 6/27 Rpt: 11/44		
2	FILER NAME Cy-Fair Repu	ublican Women PAC			3	Filer ID (Ethics Commission 00058757	n Filers)	
4	Date 11/21/2024	5 Full name of contributor Foster, Bonnie (Ms.)6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$104.00	
8	Principal occu sales manag		9	Employer (See Instructions Club Sports, Inc.	<u> </u> s)			
	Date 11/21/2024	Full name of contributor Foster, Bonnie (Ms.) Contributor address; City; Si Cypress, TX 77433	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$104.00	
	Principal occu sales manag	pation / Job title (See Instructions	5)	Employer (See Instructions Club Sports, Inc.	<u> </u> s)			
	Date 12/14/2024	Full name of contributor Foster, Bonnie (Ms.) Contributor address; City; Si	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$75.00	
	Principal occu	Cypress, TX 77433 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> s)			
	sales manag	jer		Club Sports, Inc.				
	Date 09/12/2024	Full name of contributor Gregory, Joy Contributor address; City; Si Cypress, TX 77433	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$25.00	
	Principal occu retired	pation / Job title (See Instructions	(5)	Employer (See Instructions	5)			
	Date 10/09/2024	Full name of contributor Gregory, Joy Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00	
	Principal occu retired	pation / Job title (See Instructions	(3)	Employer (See Instructions	s)			

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 7/27 Rpt: 12/44	
2	FILER NAME	LE W BAG		3	Filer ID (Ethics Commission	Filers)
		ıblican Women PAC			00058757	
4	Date 11/13/2024	 Full name of contributor ut-of-state PAC (ID# Gregory, Joy Contributor address; City; State; Zip Code 	:) 	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Cypress, TX 77433 pation / Job title (See Instructions)	9 Employer (See Instructions			
Ü	retired	section 7 oob title (occ motivations)	2 Employer (See mondellone	,		
	Date 11/22/2024	Full name of contributor out-of-state PAC (ID# Gregory, Joy Contributor address; City; State; Zip Code	<u> </u>		Amount of Contribution (\$)	\$50.00
		Cypress, TX 77433	i			
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/16/2024	Full name of contributor uut-of-state PAC (ID# Gregory, Joy Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$20.00
		Cypress, TX 77433				
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> S)		
	Date 09/12/2024	Full name of contributor out-of-state PAC (ID# Gullett, Alice Contributor address; City; State; Zip Code Houston, TX 77041	<u> </u>		Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/09/2024	Full name of contributor out-of-state PAC (ID# Gullett, Alice Contributor address; City; State; Zip Code Houston, TX 77041	<u>; </u>		Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULI	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/27 Rpt: 13/44	
2	FILER NAME Cy-Fair Rep	ublican Women PAC			3	Filer ID (Ethics Commission 00058757	ı Filers)
4	Date 11/13/2024	5 Full name of contributor Gullett, Alice	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$25.00
		Houston, TX 77041					
8	Principal occu Retired	pation / Job title (See Instructions	5)	9 Employer (See Instructions	s)		
	Date 09/12/2024	Full name of contributor Handley, Grace Contributor address; City; S				Amount of Contribution (\$)	\$5.00
	Deinsinal assu	Cypress, TX 77429		Faralouse (Coo Instruction			
	District Direc	pation / Job title (See Instructions ctor	5)	Employer (See Instructions State of Texas	S)		
	Date 11/13/2024	Full name of contributor Handley, Grace Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$5.00
		Cypress, TX 77429					
	Principal occu District Direc	pation / Job title (See Instructions ctor	5)	Employer (See Instructions State of Texas	s)		
	Date 09/12/2024	Full name of contributor Helms, Shirley Contributor address; City; S Houston, TX 77095)		Amount of Contribution (\$)	\$25.00
	Principal occuretired	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>I</u> S)		
	Date 10/09/2024	Full name of contributor Helms, Shirley Contributor address; City; S Houston, TX 77095	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	Principal occu retired	pation / Job title (See Instructions	5)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUT		SCHEDULE A1		
	The Instruc	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 9/27 Rpt: 14/44	
2	FILER NAME Cy-Fair Repu	ıblican Women PAC		3	Filer ID (Ethics Commission 00058757	n Filers)
4	Date 10/09/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
		HOUSTON, TX 77065				
8	Principal occu retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 09/12/2024	Full name of contributor out-of-state PAC (IE Hutson, Micheline Contributor address; City; State; Zip Code) 		Amount of Contribution (\$)	\$25.00
	Principal occu	HOUSTON, TX 77065 pation / Job title (See Instructions)	Employer (See Instructions	e)		
	retired	sation 7 oob title (See Instituctions)	Employer (See instructions	3)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (IE Hutson, Micheline Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$40.00
		HOUSTON, TX 77065				
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (IE Hutson, Micheline Contributor address; City; State; Zip Code HOUSTON, TX 77065)		Amount of Contribution (\$)	\$25.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (III Hutson, Micheline Contributor address; City; State; Zip Code HOUSTON, TX 77065			Amount of Contribution (\$)	\$100.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			,			

	MONET	ARY POLITICAL CONTRIBUTI		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 10/27 Rpt: 15/44	
2	FILER NAME Cy-Fair Rep	ıblican Women PAC		3	Filer ID (Ethics Commission 00058757	ı Filers)
4	Date 12/16/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
		HOUSTON, TX 77065	.			
8	Principal occu retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 11/13/2024	Full name of contributor ut-of-state PAC (ID# Kitchens, Shirley Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Tomball, TX 77375 pation / Job title (See Instructions)	Employer (See Instructions	<u>s)</u>		
	Retired	odion, oop the (See Handelons)	Employer (See mondons	3)		
	Date 09/12/2024	Full name of contributor out-of-state PAC (ID# Kopinitz, Cinthia Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$5.00
		Houston, TX 77040				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/09/2024	Full name of contributor out-of-state PAC (ID# Kopinitz, Cinthia Contributor address; City; State; Zip Code Houston, TX 77040	:)	•	Amount of Contribution (\$)	\$5.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID# Kopinitz, Cinthia Contributor address; City; State; Zip Code Houston, TX 77040	:	•	Amount of Contribution (\$)	\$40.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 11/27 Rpt: 16/44	
2	FILER NAME Cy-Fair Repu	ıblican Women PAC		3	Filer ID (Ethics Commission 00058757	Filers)
4	Date 11/13/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$5.00
_		Houston, TX 77040	1			
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/11/2024	Full name of contributor out-of-state PAC (ID#: Llewellyn, Linda Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$27.00
	Principal occu	Houston, TX 77095 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	retired					
	Date 09/12/2024	Full name of contributor)		Amount of Contribution (\$)	\$55.00
		Houston, TX 77057				
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 10/09/2024	Full name of contributor out-of-state PAC (ID#: Lombardino, James Contributor address; City; State; Zip Code Houston, TX 77057			Amount of Contribution (\$)	\$50.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/09/2024	Full name of contributor out-of-state PAC (ID#: Lombardino, James Contributor address; City; State; Zip Code Houston, TX 77057			Amount of Contribution (\$)	\$25.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTF		SCHEDUL	E A1		
	The Instru	ction Guide explains how to comp	plete this for	m.	1	Total pages Schedule A1: Sch: 12/27 Rpt: 17/44	
2	FILER NAME Cy-Fair Repu	ıblican Women PAC			3	Filer ID (Ethics Commission 00058757	n Filers)
4	Date 09/12/2024				7	Amount of Contribution (\$)	\$25.00
_		Tomball, TX 77375	1-				
8	Principal occu investor	pation / Job title (See Instructions)	9	Employer (See Instructions	i)		
	Date 10/08/2024	Full name of contributor out-of-s Lubeck, Donnie Contributor address; City; State; Zip Co				Amount of Contribution (\$)	\$25.00
		Tomball, TX 77375					
	Principal occu investor	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 11/12/2024	Full name of contributor out-of-s Lubeck, Donnie Contributor address; City; State; Zip Co	tate PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Tomball, TX 77375					
	Principal occu investor	oation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 12/03/2024	Lubeck, Donnie				Amount of Contribution (\$)	\$50.00
	Principal occu investor	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/11/2024	MacGeorge, Jeff				Amount of Contribution (\$)	\$189.00
		pation / Job title (See Instructions) tractor Home Remod		Employer (See Instructions)		
	22.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2						

	MONEI	MONETARY POLITICAL CONTRIBUTIONS					SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 13/27 Rpt: 18/44	
2	FILER NAME					3	Filer ID (Ethics Commission	n Filers)
		ublican Women PAC					00058757	
4	Date 11/24/2024	5 Full name of contributorMacGeorge, Jeff6 Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Houston, TX 77064 pation / Job title (See Instructions)	9	Employer (See Instructions) 		
•		tractor Home Remod	,	•	self	,		
	Date 11/13/2024	Full name of contributor MacGeorge, Jeff Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$5.00
		Houston, TX 77064				<u> </u>		
		pation / Job title (See Instructions stractor Home Remod	5)		Employer (See Instructions self	5)		
						_		
	Date 09/10/2024	Full name of contributor McDaniel, Claire Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$25.00
		Houston, TX 77041						
	Principal occu Retired	pation / Job title (See Instructions	s)		Employer (See Instructions	<u>(</u>		
	Date 10/08/2024	Full name of contributor McDaniel, Claire Contributor address; City; St Houston, TX 77041	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/12/2024	Full name of contributor McDaniel, Claire Contributor address; City; St Houston, TX 77041	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIB	SCHEDULE A1				
	The Instru	ction Guide explains how to complete	e this for	m.	1	Total pages Schedule A1: Sch: 14/27 Rpt: 19/44	
2	FILER NAME Cy-Fair Rep	ıblican Women PAC			3	Filer ID (Ethics Commission 00058757	ı Filers)
4	Date 12/16/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
_		Houston, TX 77041			_		
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 12/31/2024	Full name of contributor out-of-state P McDaniel, Claire Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$40.00
	Principal occu	Houston, TX 77041 pation / Job title (See Instructions)		Employer (See Instructions	 ;)		
	Retired	,					
	Date 10/09/2024	Full name of contributor	PAC (ID#:			Amount of Contribution (\$)	\$25.00
		Houston, TX 77065					
	Principal occu Retired	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/12/2024	Full name of contributor out-of-state P Metzler, Melony Contributor address; City; State; Zip Code Houston, TX 77084)		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 09/12/2024	Full name of contributor out-of-state P Metzler, Melony Contributor address; City; State; Zip Code Houston, TX 77084)		Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUT		SCHEDULE A1		
	The Instruc	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 15/27 Rpt: 20/44	
2	FILER NAME Cy-Fair Repu	ıblican Women PAC		3	Filer ID (Ethics Commissio 00058757	n Filers)
4	Date 10/09/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$55.00
_	Deinsinal assu	Houston, TX 77084	O Familia and (Con Instructions			
8	business ow	pation / Job title (See Instructions) ner	9 Employer (See Instructions	S)		
	Date 10/09/2024	Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$25.00
	Principal occu	Houston, TX 77084 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	business ow					
	Date 12/13/2024	Full name of contributor	D#:)		Amount of Contribution (\$)	\$100.00
		Houston, TX 77084				
	Principal occu business ow	pation / Job title (See Instructions) ner	Employer (See Instructions	s)		
	Date 09/12/2024	Full name of contributor out-of-state PAC (IE Mohler, Diane Contributor address; City; State; Zip Code Houston, TX 77084	D#:)		Amount of Contribution (\$)	\$25.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID Mohler, Diane Contributor address; City; State; Zip Code Houston, TX 77084	D#:)		Amount of Contribution (\$)	\$25.00
	Principal occu retired	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			·			

	MONET	ARY POLITICAL CONTRIBU		E A1			
	The Instru	ction Guide explains how to complete t	his form.		1	Total pages Schedule A1: Sch: 16/27 Rpt: 21/44	
2	FILER NAME Cy-Fair Repu	ıblican Women PAC			3	Filer ID (Ethics Commission 00058757	n Filers)
4	Date 11/13/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$25.00
		Houston, TX 77084					
8	Principal occu retired	pation / Job title (See Instructions)	9 Empl	oyer (See Instructions	5)		
	Date 09/12/2024	Contributor address; City; State; Zip Code	(ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Retired	Houston, TX 77095 pation / Job title (See Instructions)	Empl	oyer (See Instructions	<u> </u> 5)		
	Date 10/09/2024	Full name of contributor out-of-state PAC Nobis, Thomas Contributor address; City; State; Zip Code	(ID#:			Amount of Contribution (\$)	\$25.00
		Houston, TX 77095		(0)	_		
	Principal occu Retired	pation / Job title (See Instructions)	Empl	oyer (See Instructions	5)		
	Date 11/13/2024	Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$37.00
	Principal occu Retired	Houston, TX 77095 pation / Job title (See Instructions)	Empl	oyer (See Instructions	<u> </u> ;)		
	Date 11/13/2024	Full name of contributor out-of-state PAC Nobis, Thomas Contributor address; City; State; Zip Code Houston, TX 77095				Amount of Contribution (\$)	\$25.00
	Principal occu Retired	oation / Job title (See Instructions)	Empl	oyer (See Instructions	5)		
			l				

	MONET	ARY POLITICAL CONT	TRIBUTION	S		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to co	mplete this form	n.	1	Total pages Schedule A1: Sch: 17/27 Rpt: 22/44	
2	FILER NAME Cy-Fair Repu	ublican Women PAC			3	Filer ID (Ethics Commission 00058757	ı Filers)
4	Date 09/11/2024	Novelli, Mary	of-state PAC (ID#:		7	Amount of Contribution (\$)	\$27.00
8	Dringing agg	Houston, TX 77040	lo.	Employer (See Instructions	<u>,,</u>		
0		pation / Job title (See Instructions) artment Finder	3	Employer (See Instructions self	·)		
	Date 09/12/2024	Full name of contributor out- Ott, Bill Contributor address; City; State; Zip	of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	Deinsinal assu	Houston, TX 77095		Franks von (Cookstant)	<u></u>		
	Consultant	pation / Job title (See Instructions)		Employer (See Instructions self	s)		
	Date 09/12/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
		Cypress, TX 77433					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 08/29/2024	Powell, Jack	of-state PAC (ID#: Code)		Amount of Contribution (\$)	\$60.00
	Principal occu director	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/14/2024	Powell, Jack	of-state PAC (ID#:			Amount of Contribution (\$)	\$90.00
	Principal occu director	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			,				

	MONET	ARY POLITICAL CONT		SCHEDULE A1			
	The Instruc	ction Guide explains how to co	mplete this forr	n.	1	Total pages Schedule A1: Sch: 18/27 Rpt: 23/44	
2	FILER NAME Cy-Fair Repu	ublican Women PAC			3	Filer ID (Ethics Commission 00058757	n Filers)
4	Date 10/09/2024	 5 Full name of contributor out-of powell, Patricia 6 Contributor address; City; State; Zip 			7	Amount of Contribution (\$)	\$5.00
8	Principal occu	Cypress, TX 77433	la la	Employer (See Instructions	·/		
•	Entertainer/s	pation / Job title (See Instructions) iinger	9	Employer (See Instructions self	•)		
	Date 11/13/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Deinsinal assu	Cypress, TX 77433		Frankrian (Can Instructions	<u></u>		
	Entertainer/s	pation / Job title (See Instructions) singer		Employer (See Instructions self	·)		
	Date 11/25/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:			Amount of Contribution (\$)	\$150.00
	Deinsinal assu	Cypress, TX 77433		Frankrian (Can Instructions	<u></u>		
	Entertainer/s	pation / Job title (See Instructions) iinger		Employer (See Instructions self	•)		
	Date 12/02/2024	Ray, Justin	of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Sales	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/12/2024	Robin, Walter	of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE	■ A1	
	The Instru	ction Guide explains how to complete this t	orm.	1	Total pages Schedule A1: Sch: 19/27 Rpt: 24/44	
2	FILER NAME Cy-Fair Rep	ublican Women PAC		3	Filer ID (Ethics Commission 00058757	Filers)
4	Date 10/09/2024	 Full name of contributor out-of-state PAC (ID#: Robin, Walter Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$25.00
_	5	Houston, TX 77081	la = 1 (0 1 1 1			
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_Robin, Walter Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu	Houston, TX 77081 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired					
	Date 12/23/2024	Full name of contributor out-of-state PAC (ID#:_ Robin, Walter Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Houston, TX 77081				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/12/2024	Full name of contributor out-of-state PAC (ID#: Rutherford, Beth Contributor address; City; State; Zip Code Cypress, TX 77429			Amount of Contribution (\$)	\$5.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/09/2024	Full name of contributor out-of-state PAC (ID#:_Rutherford, Beth Contributor address; City; State; Zip Code Cypress, TX 77429			Amount of Contribution (\$)	\$25.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions)		
			'			

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 20/27 Rpt: 25/44	
2	FILER NAME Cy-Fair Repu	ıblican Women PAC		3	Filer ID (Ethics Commission 00058757	Filers)
4	Date 11/13/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
_		Cypress, TX 77429				
8	Principal occu retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/12/2024	Full name of contributor out-of-state PAC (ID#: Schubot, Gail Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Cypress, TX 77433				
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/09/2024	Full name of contributor			Amount of Contribution (\$)	\$25.00
		Cypress, TX 77433				
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_Schubot, Gail Contributor address; City; State; Zip Code Cypress, TX 77433			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Schubot, Gail Contributor address; City; State; Zip Code Cypress, TX 77433			Amount of Contribution (\$)	\$50.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		E A1	
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 21/27 Rpt: 26/44	
2	FILER NAME Cv-Fair Repu	FILER NAME Cy-Fair Republican Women PAC		3	Filer ID (Ethics Commission 00058757	n Filers)
4	Date 12/14/2024	5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$40.00
		Cypress, TX 77433				
8	Principal occu retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/13/2024 Smith, Kay Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$5.00
	Principal occu	Houston, TX 77095 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
Operations Administrator						
	Date 11/22/2024				Amount of Contribution (\$)	\$52.00
		Houston, TX 77095				
	Principal occu Operations A	pation / Job title (See Instructions) administrator	Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/08/2024 St Paul, Annie Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date Full name of contributor out-of-state PAC (ID#:) 12/13/2024 Stan Stanart Campaign Contributor address; City; State; Zip Code Houston, TX 77066			Amount of Contribution (\$)	\$100.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	E A1	
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 22/27 Rpt: 27/44	
2	FILER NAME Cy-Fair Repu	FILER NAME Cy-Fair Republican Women PAC		3	Filer ID (Ethics Commission 00058757	n Filers)
4	Date 12/16/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
		Houston , TX 77095-2978				
8	Principal occu High School	•	9 Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/16/2024 Stuart, Leticia Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00	
	Principal occu	Houston , TX 77095-2978 pation / Job title (See Instructions)	Employer (See Instructions)		
High School Teacher						
	Date 08/14/2024	Full name of contributor out-of-state PAC (ID#:) Texas Federation of Republican Women Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$400.00
		Austin, TX 78750-1832				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/12/2024				Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/09/2024	Full name of contributor out-of-state PAC (ID#:_ Threadgill, Wanda Contributor address; City; State; Zip Code Cypress, TX 77429)		Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		■ A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 23/27 Rpt: 28/44		
2	FILER NAME Cy-Fair Rep	FILER NAME Cy-Fair Republican Women PAC		3	Filer ID (Ethics Commission 00058757	ı Filers)	
4	Date 11/13/2024	te 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$40.00	
_		Cypress, TX 77429					
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions	i)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/13/2024 Threadgill, Wanda Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00		
	Principal occu	Cypress, TX 77429 pation / Job title (See Instructions)		Employer (See Instructions			
	Retired	oation 7 Job title (See Instituctions)		Employer (See Instructions	')		
	Date 12/02/2024)		Amount of Contribution (\$)	\$52.00
		Cypress, TX 77429					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/12/2024	Vinklarek, Sandra				Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 10/09/2024	Vinklarek, Sandra	ate PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu Retired	oation / Job title (See Instructions)		Employer (See Instructions	()		
			1				

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 24/27 Rpt: 29/44	
2	FILER NAME Cy-Fair Rep	FILER NAME Cy-Fair Republican Women PAC		3	Filer ID (Ethics Commission 00058757	n Filers)
4	Date 11/13/2024	 Full name of contributor out-of-state PAC (ID#: Vinklarek, Sandra Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$25.00
		Cypress, TX 77433	1			
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/16/2024 Vinklarek, Sandra Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$20.00
	Cypress, TX 77433 Principal occupation / Job title (See Instructions) Employer (See Instructions)		()			
	Retired	sation, our time (ever mondonons)	Employer (See meadeache	,		
	Date Full name of contributor out-of-state PAC (ID#:) 08/26/2024 Zachary, Linda Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$120.00
		Houston, TX 77095	1			
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 08/26/2024 Zachary, Linda Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$65.00
	Principal occuretired	Houston, TX 77095 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 08/27/2024	Full name of contributor out-of-state PAC (ID#: Zachary, Linda Contributor address; City; State; Zip Code Houston, TX 77095			Amount of Contribution (\$)	\$25.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		■ A1	
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 25/27 Rpt: 30/44	
2	FILER NAME Cy-Fair Rep	FILER NAME Cy-Fair Republican Women PAC		3	Filer ID (Ethics Commission 00058757	Filers)
4	Date 09/12/2024	te 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$5.00
		Houston, TX 77095				
8	Principal occu retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 09/30/2024	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Houston, TX 77095 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#: Zachary, Linda Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Houston, TX 77095 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 11/13/2024	Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$27.00
	Principal occu	Houston, TX 77095 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#: Zachary, Linda Contributor address; City; State; Zip Code Houston, TX 77095			Amount of Contribution (\$)	\$6.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			1			

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		■ A1	
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 26/27 Rpt: 31/44	
2	FILER NAME Cy-Fair Rep	FILER NAME Cy-Fair Republican Women PAC		3	Filer ID (Ethics Commission 00058757	ı Filers)
4	Date 11/15/2024	ate 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$50.00
		Houston, TX 77095	1			
8	Principal occu retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Zachary, Linda Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00	
	Principal occu	Houston, TX 77095 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	retired	,				
	Date 12/31/2024	Full name of contributor out-of-state PAC (ID#: Zachary, Linda Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$40.00
		Houston, TX 77095				
	Principal occu retired	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/31/2024	Full name of contributor out-of-state PAC (ID#: Zachary, Linda Contributor address; City; State; Zip Code Houston, TX 77095			Amount of Contribution (\$)	\$27.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> 5)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#: kridner, joanne Contributor address; City; State; Zip Code tomball, TX 77377			Amount of Contribution (\$)	\$50.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 27/27 Rpt: 32/44
2	FILER NAME Cy-Fair Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00058757
4	Date 11/13/2024 5 Full name of contributor out-of-state PAC (ID#: kridner, joanne 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$20.0
	tomball, TX 77377	
8	Principal occupation / Job title (See Instructions) retired 9 Employer (See Instructions)	ctions)
	Date Full name of contributor out-of-state PAC (ID#:	_) Amount of Contribution (\$) \$5.0
	tomball, TX 77377	
	Principal occupation / Job title (See Instructions) retired Employer (See Instructions)	ctions)

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

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/10 Rpt: 33/44	Cy-Fair Republican Women PAC 00058757
4 Date	5 Payee name
11/18/2024	ARK Ent.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$23.82	15618 Howell Grove Ln
Expenditure from corporate funds	Houston, TX 77095
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
LXI LINDITORE	Check if Austin, TX, officeholder living expense
	bank stamp
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date 07/05/2024	Payee name Crown Trophy
	Crown Trophy
Amount (\$)	Payee address; City; State; Zip Code
\$12.18	4492 Hwy 6 N
Expenditure from	
corporate funds	Houston, TX 77084-3440
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	name badge Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	name badge
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
12/31/2024	Crown Trophy
Amount (\$)	Payee address; City; State; Zip Code
\$12.18	4492 Hwy 6 N
Expenditure from corporate funds	Houston, TX 77084-3440
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	name badge Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	name badge
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
5	•

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/10 Rpt: 34/44	Cy-Fair Republican Women PAC	00058757
4 Date	5 Payee name	<u> </u>
11/25/2024	Crown Trophy	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$12.18	4492 Hwy 6 N	
- "		
Expenditure from corporate funds	Houston, TX 77084-3440	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Name Badge	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Name Badge
		Name Baage
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	lught Office held
expenditure to benefit C/OI		Since Hold
Date	Payee name	
12/06/2024	Friends of Tom Oliverson	
Amount (\$)	Payee address; City; State; Zip Co	nde
\$750.00	1 E Greenway Plaza Ste 225	
Ψ100.00	1 2 Groomay Fiaza die 226	
Expenditure from corporate funds	Houston, TX 77046	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gift to a Candidate Campaign Fund
Complete ONLY if direct	Candidate/Officeholder name Office sou	I ught Office held
expenditure to benefit C/OI	-1	
Date	Payee name	
08/01/2024	Hobby Lobby	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$83.05	26060 290 West	
Expenditure from corporate funds	Cypress, TX 77070	
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 Room Decorations
		1.00m Decorations
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	lght Office held
expenditure to benefit C/OI		Since Held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 7 1 0 1 1 5	<u> </u>
1 Total pages Schedule F1: Sch: 3/10 Rpt: 35/44	2 FILER NAME Cy-Fair Republican Women PAC 3 Filer ID (Ethics Commission Filers) 00058757
4 Date	5 Payee name
09/27/2024	Homestead Website Service
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$338.99	10 Corporate Drive
Expenditure from corporate funds	Burlington, MA 01803
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	internet expense
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/26/2024	James Lombardino Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$750.00	P.O. Box 3893
Expenditure from corporate funds	Houston, TX 77253
•	· · · · · · · · · · · · · · · · · · ·
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Gift to a Candidate Campaign Fund
	Gilt to a Candidate Campaigh Fund
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
11/20/2024	Kay Smith Campaign
11/20/2024	
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1 E. Greenway Plaza, Ste. 225
Expenditure from corporate funds	Houston, TX 77046
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Gift/Awards/Memorials Expense
	Check if Austin, TX, officeholder living expense
	Gift to a Candidate Campaign Fund
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

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

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:		;)
Sch: 4/10 Rpt: 36/44	Cy-Fair Republican Women PAC 00058757	,
4 Date	5 Payee name	
08/19/2024	Kwik Copy	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$260.68	9744 Whithorn Dr	
Expenditure from corporate funds	Houston, TX 77095	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Podium Board	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date	David manual	_
12/13/2024	Payee name	
	Lacy Hull Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$750.00	P.O. Box 19231	
Expenditure from corporate funds	Houston, TX 77224	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Gift/Awards/Memorials Expense	
	Check if Austin, TX, officeholder living expense Gift to a Candidate Campaign Fund	
	Gilt to a Carididate Campaign Fund	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		
Date	Payee name	
09/17/2024	Longwood Golf Club	
Amount (\$)	Payee address; City; State; Zip Code	
\$895.83	13300 Longwood Trace Drive	
- Evenanditura from		
Expenditure from corporate funds	Cypress, TX 77429	
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.	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Venue and meal	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experialitate to better 6/01	''	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I 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: 5/10 Rpt: 37/44	Cy-Fair Republican Women PAC 00058757
4 Date	5 Payee name
10/11/2024	Longwood Golf Club
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$870.24	13300 Longwood Trace Drive
- "	
Expenditure from corporate funds	Cypress, TX 77429
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	venue and meal
	vende and mean
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
11/13/2024	Longwood Golf Club
Amount (\$)	Payee address; City; State; Zip Code
\$639.97	13300 Longwood Trace Drive
Expenditure from corporate funds	Cypress, TX 77429
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense venue and meal
	vende and mear
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Douge name
12/17/2024	Payee name Longwood Golf Club
	5
Amount (\$)	Payee address; City; State; Zip Code
\$1,713.39	13300 Longwood Trace Drive
Expenditure from	
corporate funds	Cypress, TX 77429
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense venue and meal
	vende and mear
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)		
4 7 . 1	The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:			
Sch: 6/10 Rpt: 38/44	Cy-Fair Republican Women PAC 00058757		
4 Date	5 Payee name		
12/11/2024	Mike Schofield Campaign		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$750.00	1 E. Greenway Plaza, Ste. 225		
Expenditure from corporate funds	Houston, TX 77046		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Gift/Awards/Memorials Expense		
EXPENDITORE	Check if Austin, TX, officeholder living expense		
	Gift to a Candidate Campaign Fund		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI	1		
Date	Payee name		
12/16/2024	Mint Mobile		
Amount (\$)	Payee address; City; State; Zip Code		
\$202.52			
Expenditure from corporate funds	Costa Mesa, CA 92626		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	to be refunded Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense		
	Not our expense so has been refunded.		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
07/30/2024	Public Storage		
Amount (\$)	Payee address; City; State; Zip Code		
\$76.00	6456 Hwy 6 N		
Expenditure from corporate funds	Houston, TX 77084		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF	Storage Space Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Storage Space for club items		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI	expenditure to benefit C/OH		

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

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1: Sch: 7/10 Rpt: 39/44	2 FILER NAME3 Filer ID(Ethics Commission Filers)Cy-Fair Republican Women PAC00058757	
4 Date 08/13/2024	5 Payee name Public Storage	
6 Amount (\$) \$97.64	7 Payee address; City; State; Zip Code 6456 Hwy 6 N	
Expenditure from corporate funds	Houston, TX 77084	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Storage (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage for club items	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date 08/23/2024	Payee name Public Storage	
Amount (\$) \$60.00	Payee address; City; State; Zip Code 6456 Hwy 6 N	
Expenditure from corporate funds	Houston, TX 77084	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Storage (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage for club items	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date 12/16/2024	Payee name Public Storage	
Amount (\$) \$69.00	Payee address; City; State; Zip Code 6456 Hwy 6 N	
Expenditure from corporate funds	Houston, TX 77084	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Storage unit (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage of club items	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I 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: 8/10 Rpt: 40/44	Cy-Fair Republican Women PAC 00058757		
4 Date	5 Payee name		
09/19/2024	Rice University		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$750.00	6100 Main St		
- "			
Expenditure from corporate funds	Houston, TX 77005		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	high school scholarship		
	riigit seriooi seriota siip		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			
Date	Power name		
07/17/2024	Payee name Sam's Club		
Amount (\$)	Payee address; City; State; Zip Code		
\$57.36	12205 West Road		
Expenditure from			
corporate funds	Houston, TX 77041		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense printer ink		
	printer link		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			
Data	David and the second se		
Date 07/03/2024	Payee name Texas Federation Republican Women		
	·		
Amount (\$)	Payee address; City; State; Zip Code		
\$50.60	13740 N Highway 183, Suite J4		
Expenditure from			
corporate funds	Austin, TX 78750		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense Member Fees		
	Wichinger Fees		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OH		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/W The Instruction Guide explains how to cor	ages/Contract Labor OTHER (enter a category not listed above) nplete this form.	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 9/10 Rpt: 41/44	Cy-Fair Republican Women PAC	00058757	
4 Date	5 Payee name		
09/17/2024	Texas Federation Republican Women		
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de	
\$25.30	13740 N Highway 183, Suite J4		
- Evpanditura from			
Expenditure from corporate funds	Austin, TX 78750		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense membership fees	
		membership ices	
9 Complete ONLY if direct	Candidate/Officeholder name Office sour	oht Office held	
expenditure to benefit C/O		onice neid	
Date	Payee name		
09/18/2024	Texas Federation Republican Women		
Amount (\$)	Payee address; City; State; Zip Coo	de	
\$26.35	13740 N Highway 183, Suite J4		
Evnanditura from			
Expenditure from corporate funds	Austin, TX 78750		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.	
EXI ENDITORE		Check if Austin, TX, officeholder living expense	
		membership fees	
Operation ONLY if discont	Out distance (Office helder recovery)	Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office souç	yht Office held	
·			
Date	Payee name		
09/26/2024	Texas Federation Republican Women		
Amount (\$)	Payee address; City; State; Zip Coo	de	
\$98.96	13740 N Highway 183, Suite J4		
Evnanditura from			
Expenditure from corporate funds	Austin, TX 78750		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF	Event Expense	Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE		Check if Austin, TX, officeholder living expense	
		Event Expense	
Complete ONLY if direct	Candidate/Officeholder name Office soug	ght Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/O		ght Office held	
		ght Office held	

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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	Credit Card Payment The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 10/10 Rpt: 42/44	Cy-Fair Republican Women PAC	00058757	
4 Date	5 Payee name		
11/19/2024	Texas Federation Republican Women		
6 Amount (\$)	7 Payee address; City; State; Zip Coo	le	
\$26.35	13740 N Highway 183, Suite J4	-	
,			
Expenditure from	Austin, TX 78750		
corporate funds			
8 PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	(b) Description Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense	
		member fees	
9 Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held	
expenditure to benefit C/O	-1		
Date	Payee name		
09/26/2024	University of Texas		
	•	la .	
Amount (\$)	Payee address; City; State; Zip Coo	le	
\$750.00	101 East 21st St.		
Expenditure from			
corporate funds	Austin, TX 78712		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense high school scholarship	
		riigit school scholaiship	
Complete ONLY if direct	Candidate/Officeholder name Office souc	ht Office held	
expenditure to benefit C/O		Tit. Office field	
Date	Payee name		
11/04/2024	Walmart		
Amount (\$)	Payee address; City; State; Zip Coo	le	
\$5.72	26270 Northwest Fwy		
Expenditure from			
corporate funds	Cypress, TX 77429		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE		Check if Austin, TX, officeholder living expense	
		paper	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht Office held	

	MADE FROM POLITICAL CONTRIBUTIONS		SCHEDULE I		
	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule I: Sch: 1/1 Rpt:	FILER NAME Cy-Fair Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00058757		
4	Date 12/31/2024	5 Payee name Square			
6	Amount (\$) 37.13 Expenditure from corporate funds	7 Payee Address; City; State; Zip 1455 Market St, Ste 600 San Francisco, CA 94103			
8	PURPOSE OF EXPENDITURE	(,) s , i	See instructions regarding type of information required.) for Card Contributions		

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: 44/44 2 FILER NAME Filer ID (Ethics Commission Filers) Cy-Fair Republican Women PAC 00058757 8 Amount (\$) Date 5 Name of person from whom amount is received 07/01/2024 **Energy Capital Credit Untion** \$2.66 6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77065 7 Purpose for which amount is received Check if political contribution returned to filer Amount (\$) Date Name of person from whom amount is received 08/01/2024 **Energy Capital Credit Untion** \$2.75 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77065 Purpose for which amount is received Check if political contribution returned to filer