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) 00054608 3 COMMITTEE NAME **OFFICE USE ONLY** Conner Harrington Republican Women Date Received **ELECTRONICALLY FILED** 07/06/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P. O. Box 865104 Date Hand-delivered or Date Postmarked Plano, TX 75086 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Jenny L. NAME NICKNAME LAST **SUFFIX** McCall STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 5949 Burgandy Street STREET **ADDRESS** (Residence or Business) Plano, TX 75093 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** MAILING **ADDRESS CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 244-2652 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2025 06/30/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

L2 COMMITTEE NAME				13 Filer	ID	(Ethics Commission Filers)
Conner Harrington Rep	ublican Women			0005	4608	
4 COMMITTEE	1. Candidates	A. Supported				
ACTIVITY	(Identify by name or, if applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures	A. Supported				
	(Describe by date and location of election and nature of issue.)	7. Cupporteu				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
5 CONTRIBUTION		D POLITICAL CON	TRIBUTIONS (OTHER THAN	. 1		
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M X check here if this report	OR GUARANTEE: MADE ELECTRONI	S OF LOANS, OR CALLY)	N	\$	0.00
	2. TOTAL POLITICA	L CONTRIBUTION	ONS		\$	0.000.07
	(OTHER THAN PLE	EDGES, LOANS, O	R GUARANTEES OF LOANS	S)	•	8,392.07
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXP	ENDITURES		\$	0.00
	4. TOTAL POLITICA	L EXPENDITUR	ES		\$	8,302.56
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING		MAINTAINED AS OF THE LA	AST DAY	\$	27,223.88
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE I		OUTSTANDING LOANS AS (OF THE	\$	0.00
6 AFFIDAVIT	<u> </u>					
		true	ear, or affirm, under penalty o and correct and includes all ii er Title 15, Election Code.			
					o "	
				enny L. Mc		
			Signature of	Campaign	rreasur	ei
AFFIX NOTARY	STAMP / SEAL ABOVE					
Sworn to and subscribed	before me, by the said			_, this the _		day
	_, 20, to certify \			_		
Signature of officer ad	ministering oath	Printed name of o	fficer administering oath	Title	of office	er administering oath

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

					3 of 26
		EE NAME arrington Republican Women	18 Filer ID 00054608	(Ethics Commissio	n Filers)
19 SCH	EDULE	SUBTOTALS		SUBTOTAL A	AMOUNT
NAM	E OF S	SCHEDULE			
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	8,392.07
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 CORPORALABOR ORGANIZATION	TION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (DRGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	8,302.56
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.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 1/11 Rpt: 4/26	
2	FILER NAME Conner Harr	ngton Republican Women		3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 02/17/2025	 Full name of contributor out-of-state PAC (ID# Aldrich, Ellen Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$241.10
_		Dallas, TX 75252	1	Ĺ		
8	Principal occu Consultant	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 01/03/2025	Contributor address; City; State; Zip Code	±)		Amount of Contribution (\$)	\$96.02
	Principal occu	Plano, TX 75075 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired	,	p - 3 - (,		
	Date 02/17/2025	Full name of contributor out-of-state PAC (ID# Backous, Cheryl Contributor address; City; State; Zip Code	÷)	•	Amount of Contribution (\$)	\$144.60
		Plano, TX 75075				
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/27/2025	Full name of contributor out-of-state PAC (ID#Baird, Kay Contributor address; City; State; Zip Code Plano, TX 75093	#:)	•	Amount of Contribution (\$)	\$96.02
	Principal occu Account Mar	pation / Job title (See Instructions)	Employer (See Instructions	<u>1</u> S)		
	Date 02/24/2025	Full name of contributor out-of-state PAC (ID#Braun, Juanita Contributor address; City; State; Zip Code Plano, TX 75023	±:)		Amount of Contribution (\$)	\$144.60
	Principal occu retired	oation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/11 Rpt: 5/26	
2	FILER NAME Conner Harr	ngton Republican Women		3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 01/03/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$96.02
_		Allen, TX 75013	2.5.1.(2.1.1.1)			
8	Consultant	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 03/19/2025	Full name of contributor out-of-state PAC (ID#:_ Cole, Phyllis Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00
	Principal occu	Plano, TX 75023 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	sation, oob title (oce instructions)	Employer (See Matractions	,		
	Date 06/02/2025	Full name of contributor)		Amount of Contribution (\$)	\$1,000.00
		Plano, TX 75074				
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions)		
	Date 02/16/2025	Full name of contributor out-of-state PAC (ID#:_ DeCorey, Susan Contributor address; City; State; Zip Code Plano, TX 75093)		Amount of Contribution (\$)	\$38.45
	Principal occu Manager Las	oation / Job title (See Instructions) er Kinetic	Employer (See Instructions)		
	Date 01/07/2025	Full name of contributor out-of-state PAC (ID#:_ Dodson, Lynn Contributor address; City; State; Zip Code McKinney, TX 75070			Amount of Contribution (\$)	\$125.00
	Principal occu Homemaker	oation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains hov	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/11 Rpt: 6/26	
2	FILER NAME Conner Harr	ington Republican Women			3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 03/13/2025	5 Full name of contributor Donley, Diane6 Contributor address; City; S	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$40.00
_		Plano, TX 75075	,		Ĺ		
8		pation / Job title (See Instructions Development	5)	9 Employer (See Instructions	S)		
	Date 03/13/2025	Full name of contributor Donley, Diane Contributor address; City; S				Amount of Contribution (\$)	\$300.00
	Principal occu	Plano, TX 75075 pation / Job title (See Instructions	5)	Employer (See Instructions	 s)		
	VP Business	Development					
	Date 02/11/2025	Full name of contributor Dorrance, Cheryl Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code)		Amount of Contribution (\$)	\$150.00
		Plano, TX 75074					
	Principal occu Retired	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date 06/23/2025	Full name of contributor Dorrance, Cheryl Contributor address; City; S Plano, TX 75074)		Amount of Contribution (\$)	\$90.00
	Principal occu Retired	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date 04/04/2025	Full name of contributor Downs, Christene Contributor address; City; S Plano, TX 75075	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$38.11
	Principal occu Attorney	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUT	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 4/11 Rpt: 7/26	
2	FILER NAME Conner Harr	ngton Republican Women		3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 02/18/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
		Plano, TX 75023				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 03/27/2025	Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$192.04
	Principal occu	Richardson, TX 75082 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney					
	Date 04/16/2025	Full name of contributor	#:)	•	Amount of Contribution (\$)	\$40.00
		Melissa, TX 75454				
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 01/21/2025	Full name of contributor out-of-state PAC (ID Gilbert, Jerri Contributor address; City; State; Zip Code Plano, TX 75023	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Realtor	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 03/13/2025	Full name of contributor out-of-state PAC (ID Gilbert, Jerri Contributor address; City; State; Zip Code Plano, TX 75023			Amount of Contribution (\$)	\$300.00
	Principal occu Realtor	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTR	RIBUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to com	plete this for	m.	1	Total pages Schedule A1: Sch: 5/11 Rpt: 8/26	
2	FILER NAME Conner Harr	ngton Republican Women			3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 03/13/2025	 Full name of contributor out-of-s Gough, Jane Contributor address; City; State; Zip Co)	7	Amount of Contribution (\$)	\$150.00
_		Plano, TX 75025	1-				
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 02/11/2025	Halsey, Sandra Contributor address; City; State; Zip Co)		Amount of Contribution (\$)	\$260.00
	Principal occu	Plano, TX 75023 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Retired	, , , , , , , , , , , , , , , , , , ,					
	Date 03/13/2025	Full name of contributor out-of-s Halsey, Sandra Contributor address; City; State; Zip Co	state PAC (ID#:)		Amount of Contribution (\$)	\$750.00
		Plano, TX 75023					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 03/19/2025	Halsey, Sandra				Amount of Contribution (\$)	\$40.00
	Principal occu Retired	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date 04/07/2025	Halsey, Sandra				Amount of Contribution (\$)	\$135.00
	Principal occu Retired	oation / Job title (See Instructions)		Employer (See Instructions	()		
			'				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 6/11 Rpt: 9/26	
2	FILER NAME Conner Harr	ngton Republican Women		3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 04/16/2025	 Full name of contributor	_	7	Amount of Contribution (\$)	\$25.00
		Plano, TX 75023	T			
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 03/19/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00
	Principal occu Retired	Plano, TX 75075 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 02/18/2025	Full name of contributor out-of-state PAC (ID#: Johann, Carla Contributor address; City; State; Zip Code Plano, TX 75075			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 06/09/2025	Full name of contributor out-of-state PAC (ID#: Johann, Carla Contributor address; City; State; Zip Code Plano, TX 75075			Amount of Contribution (\$)	\$45.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 01/07/2025	Full name of contributor out-of-state PAC (ID#: Johnson, Diane Contributor address; City; State; Zip Code Plano, TX 75074			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	5)		
			'			

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 7/11 Rpt: 10/26	
2	FILER NAME Conner Harr	ngton Republican Women		3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 01/03/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$96.02
		Plano, TX 75025				
8	Principal occu retired	oation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 06/09/2025	Contributor address; City; State; Zip Code	<u>:</u>)	•	Amount of Contribution (\$)	\$90.00
	Principal occu Retired	Plano, TX 75093 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 03/19/2025	Full name of contributor out-of-state PAC (ID# Landen, Dianne Contributor address; City; State; Zip Code	±:)		Amount of Contribution (\$)	\$100.00
		Plano, TX 75075	1			
	retired	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 01/21/2025	Contributor address; City; State; Zip Code	÷)		Amount of Contribution (\$)	\$100.00
	Principal occu Business Ma	Plano, TX 75023 pation / Job title (See Instructions) nagement	Employer (See Instructions	<u> </u> S)		
	Date 02/17/2025	Full name of contributor out-of-state PAC (ID# Miller, Kathy Contributor address; City; State; Zip Code Plano, TX 75023	<u>: </u>		Amount of Contribution (\$)	\$289.35
	Principal occu Business Ma	oation / Job title (See Instructions) nagement	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 8/11 Rpt: 11/26	
2	FILER NAME Conner Harr	ngton Republican Women		3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 02/11/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$150.00
_	<u> </u>	McKinney, TX 75070	10 5 1 (0 1 1 1	_		
8	Principal occu Professor	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 06/09/2025	Full name of contributor out-of-state PAC (ID# Miller, Paula Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$45.00
	Deinsinal assu	McKinney, TX 75070	Frankrija (Caa kastuustia na	<u></u>		
	Professor	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/08/2025	Full name of contributor out-of-state PAC (ID# Morris, Deborah Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$134.80
		Plano, TX 75023				
	Principal occu Photographe	pation / Job title (See Instructions) r	Employer (See Instructions	s)		
	Date 02/17/2025	Full name of contributor out-of-state PAC (ID# Morris, Deborah Contributor address; City; State; Zip Code Plano, TX 75023	:)		Amount of Contribution (\$)	\$289.35
	Principal occu Photographe	pation / Job title (See Instructions) r	Employer (See Instructions	5)		
	Date 06/09/2025	Full name of contributor out-of-state PAC (ID# Mott, Maria Contributor address; City; State; Zip Code Plano, TX 75093	:)		Amount of Contribution (\$)	\$45.00
	Principal occu Business Ow	pation / Job title (See Instructions) /ner	Employer (See Instructions	5)		
			•			

	MONEI	ARY POLITICAL CONTRIB	UTIONS	SCHEDULE A1
	The Instruc	ction Guide explains how to complete	e this form.	1 Total pages Schedule A1: Sch: 9/11 Rpt: 12/26
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		ngton Republican Women		00054608
4	Date 04/07/2025	 Full name of contributor out-of-state P/Pruitt, Kathryn Contributor address; City; State; Zip Code 	AC (ID#:)	7 Amount of Contribution (\$) \$100.00
		Frisco, TX 75034		
8	Principal occu Judge	oation / Job title (See Instructions)	9 Employer (See Instructions)
	Date 06/09/2025	Full name of contributor out-of-state PAReynolds, Daryl Contributor address; City; State; Zip Code	AC (ID#:)	Amount of Contribution (\$) \$45.00
	Principal occu	Parker, TX 75002-3027 pation / Job title (See Instructions)	Employer (See Instructions	
	Retired	odion, oop tile (See Instructions)	Employer (See Instructions	,
	Date 01/03/2025	Full name of contributor out-of-state P/ Self, Keith Contributor address; City; State; Zip Code	AC (ID#:)	Amount of Contribution (\$) \$119.66
		McKinney, TX 75071-1548		
	Principal occu U.S. Congre	oation / Job title (See Instructions) ssman	Employer (See Instructions	
	Date 04/07/2025	Full name of contributor out-of-state PAShapiro, Florence Contributor address; City; State; Zip Code Plano, TX 75093	AC (ID#:)	Amount of Contribution (\$) \$100.00
	Principal occu Consultant	oation / Job title (See Instructions)	Employer (See Instructions	
	Date 06/23/2025	Full name of contributor out-of-state PA Slaughter, Michael Contributor address; City; State; Zip Code McKinney, TX 75069	AC (ID#:)	Amount of Contribution (\$) \$1,000.00
	Principal occu Landscape (pation / Job title (See Instructions)	Employer (See Instructions	

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this t	orm.	1	Total pages Schedule A1: Sch: 10/11 Rpt: 13/26	
2	FILER NAME Conner Harr	ngton Republican Women		3	Filer ID (Ethics Commission 00054608	n Filers)
4	Date 03/13/2025	 Full name of contributor	_	7	Amount of Contribution (\$)	\$150.00
		Plano, TX 75075				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 06/06/2025	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$46.80
	Principal occu Retired	Plano, TX 75093 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/19/2025	Full name of contributor			Amount of Contribution (\$)	\$100.00
	Principal occu	Plano, TX 75093 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	odion / oob title (oce mondellons)	Employer (See morractions	')		
	Date 03/27/2025	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$96.02
	Principal occu District Judg	Plano, TX 75024 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: Tu, Maria Contributor address; City; State; Zip Code Plano, TX 75023)		Amount of Contribution (\$)	\$38.11
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1				
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 11/11 Rpt: 14/26		
2	FILER NAME Conner Harr	ington Republican Women		3	Filer ID (Ethics Commissio 00054608	n Filers)	
4	Date 06/02/2025 5 Full name of contributor out-of-state PAC (ID#:) Wade, Terry 6 Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$40.00	
	Delevired	Plano, TX 75023	O Frankrije (Contration				
8	•	pation / Job title (See Instructions) irector CCGOP	9 Employer (See Instructions	5)			
	Date 01/21/2025	Full name of contributor out-of-state PAC (ID#: Watson, Dona Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
		Plano, TX 75086		Ĺ			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	S)			
	Date 04/07/2025	Full name of contributor out-of-state PAC (ID#: Wheless, Cynthia Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
		Plano, TX 75025					
	Principal occu Judge	pation / Job title (See Instructions)	Employer (See Instructions State of Texas	5)			

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/12 Rpt: 15/26	2 FILER NAME Conner Harrington Republican Women 3 Filer ID (Ethics Commission Filers) 00054608
4 Date	5 Payee name
02/27/2025	Collin County Republican Headquarters
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 2963 W. 15th St. #2981
Expenditure from corporate funds	Plano, TX 75075
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Meeting room rental
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/27/2025	Collin County Republican Headquarters
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	2963 W. 15th St. #2981
Expenditure from corporate funds	Plano, TX 75075
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Donation for Lincoln Day Dinner
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/12/2025	Collin County Republican Headquarters
Amount (\$)	Payee address; City; State; Zip Code
\$3,000.00	2963 W. 15th St. #2981
Expenditure from corporate funds	Plano, TX 75075
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.
EAFENDITURE	Check if Austin, TX, officeholder living expense
	2 tables for Lincoln Day dinner that was reimbursed
	by members
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
Contributions/ Donations Made By -

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment	Il 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: 2/12 Rpt: 16/26	Conner Harrington Republican Women 00054608
4 Date	5 Payee name
04/10/2025	Collin County Republican Headquarters
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$150.00	2963 W. 15th St. #2981
Expenditure from corporate funds	Plano, TX 75075
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Rent space for CHRW meetings
O Committee ONII Wife discret	Candidate/Officeholder name Office sought Office held
Complete ONLY if direct expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
Date	Payee name
01/03/2025	Icontact
Amount (\$)	Payee address; City; State; Zip Code
\$29.23	2121 RDU Center Drive
	4th Floor
Expenditure from corporate funds	Morrisville, NC 27560
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
	Website
	Western Control of the Control of th
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/03/2025	Icontact
Amount (\$)	Payee address; City; State; Zip Code
\$29.23	2121 RDU Center Drive
	4th Floor
Expenditure from corporate funds	Morrisville, NC 27560
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
LAI LINDITURE	Check if Austin, TX, officeholder living expense
	Website
Complete ONII V If all a	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	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 Con Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/12 Rpt: 17/26	Conner Harrington Republican Women 00054608
4 Date	5 Payee name
03/03/2025	Icontact
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$29.23	2121 RDU Center Drive
	4th Floor
Expenditure from corporate funds	Morrisville, NC 27560
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
_/	Check if Austin, TX, officeholder living expense
	Website
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Data	
Date	Payee name
04/04/2025	Icontact
Amount (\$)	Payee address; City; State; Zip Code
\$29.23	2121 RDU Center Drive
Evponditure from	4th Floor
Expenditure from corporate funds	Morrisville, NC 27560
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Website
Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Dayaa nama
06/04/2025	Payee name Icontact
Amount (\$)	Payee address; City; State; Zip Code
\$29.23	2121 RDU Center Drive
Expenditure from	4th Floor
corporate funds	Morrisville, NC 27560
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Website
	Website
Complete <u>ONLY</u> 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
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

Candidate/Officeholder/Politica Credit Card Payment	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: 4/12 Rpt: 18/26	Conner Harrington Republican Women 00054608					
4 Date	5 Payee name					
05/05/2025	Icontact					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$29.23	2121 RDU Center Drive					
	4th Floor					
Expenditure from corporate funds	Morrisville, NC 27560					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.					
	Check if Austin, TX, officeholder living expense Website					
	Website					
• Committee Chillian "	Open districts (Office the Island as a second secon					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held					
experientare to benefit ere.						
Date	Payee name					
06/10/2025	Miklosh, Corrine					
Amount (\$)	Payee address; City; State; Zip Code					
\$59.92	3525 Chaney Lane					
Expenditure from corporate funds	Plano, TX 75093					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Event Expense					
EXI ENDITORE	Check if Austin, TX, officeholder living expense					
	reimburse for cookies and water for Memorial Day event					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
SAPORALEIO LO BORIORI O/OI	•					
Date	Payee name					
02/27/2025	NFRW					
Amount (\$)	Payee address; City; State; Zip Code					
\$25.00	124 N. Alfred St.					
Expenditure from corporate funds	Alexandria, VA 22314					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Gift/Awards/Memorials Expense					
EAPENDITUKE	Check if Austin, TX, officeholder living expense					
	Marian Martin Building Fund requirement					
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 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: 5/12 Rpt: 19/26	Conner Harrington Republican Women 00054608
4 Date	5 Payee name
02/27/2025	NFRW
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25.00	124 N. Alfred St.
Expenditure from corporate funds	Alexandria, VA 22314
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	NFRW Federation Fund requirement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
·	
Date 02/27/2025	Payee name NFRW
Amount (\$) \$25.00	Payee address; City; State; Zip Code 124 N. Alfred St.
Ψ23.00	124 N. Allieu St.
Expenditure from corporate funds	Alexandria, VA 22314
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Cift/Awards/Mamorials Expanse Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Kathy Bugger Residential Fund requirement
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 04/04/2025	Payee name Plush in a Rush
Amount (\$) \$186.00	Payee address; City; State; Zip Code 1223 Security Drive
Ψ100.00	1225 Security Brive
Expenditure from corporate funds	Dallas, TX 75247
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
	Bears purchased for GEM girls
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment			s/memoriais Expense rices	Salaries/M		e /Contract Labor		OTHER (enter a	strict a category not listed	above)
				ruction Guide explain	s how to co	mple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Comm	ission Filers)
	Sch: 6/12 Rpt: 20/26		Conner Harrington	Republican Wome	en				00054608		
4	Date	5	Payee name								
	06/10/2025		Rippel, Catherine								
6	Amount (\$)	7	Payee address; C	City; Stat	e; Zip Co	de					
	\$2,000.00		1604 Old Course D	rive							
	Expenditure from corporate funds		Plano, TX 75093								
8	PURPOSE	(a)	Category (See Categori	as listed at the top of this s	chodulo)	(b)	Description				
	OF	<u> </u> `	Gift/Awards/Memor		cricuale)	` '	:	outsi	de of Texas. Com	nplete Schedule T.	
	EXPENDITURE						Check if Austin,	, TX,	officeholder living	g expense	
							Scholarships	aw	arded to stu	udent	
9	Complete ONLY if direct		Candidate/Officeholder	name	Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	⊣									
	Date		Payee name								
	01/28/2025		Sunbelt Self Storag	je							
	Amount (\$)		Payee address; C	City; Stat	e; Zip Co	de					
	\$110.00		2445 W. Plano Pkw	vy.							
	Expenditure from corporate funds		Plano, TX 75075								
	PURPOSE	(a)	Category (See Categori	es listed at the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE		Office Overhead/Re				Check if travel of	outsi	de of Texas. Com	nplete Schedule T.	
	LXFLINDITORL						_		officeholder living	g expense	
							storage unit r	ent			
		L									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder	name	Office sou	ght			Office h	eld	
		_									
	Date		Payee name								
	02/28/2025		Sunbelt Self Storag	je							
	Amount (\$)		Payee address; C	City; Stat	e; Zip Co	de					
	\$110.00		2445 W. Plano Pkw	vy.							
	T Expenditure from										
	corporate funds		Plano, TX 75075								
	PURPOSE	(a)	Category (See Categori	es listed at the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE		Office Overhead/Re				브			nplete Schedule T.	
	LXI ENDITORE						_		officeholder living	g expense	
							Storage unit r	en	ι		
	Complete ONLY if direct	بــــــــــــــــــــــــــــــــــــــ	Condidate/Office belief	, nama	Office	ak+			Office	old	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder	паше	Office sou	ynt			Office h	eiu	

SCHEDULE F1

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

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	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/12 Rpt: 21/26	Conner Harrington Republican Women 00054608
4 Date	5 Payee name
03/28/2025	Sunbelt Self Storage
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$110.00	2445 W. Plano Pkwy.
Expenditure from corporate funds	Plano, TX 75075
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Storage unit rental
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/28/2025	Sunbelt Self Storage
Amount (\$)	Payee address; City; State; Zip Code
\$110.00	2445 W. Plano Pkwy.
Expenditure from corporate funds	Plano, TX 75075
PURPOSE	To .
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Storage unit rent
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/28/2025	Sunbelt Self Storage
Amount (\$)	Payee address; City; State; Zip Code
\$124.00	2445 W. Plano Pkwy.
Expenditure from corporate funds	Plano, TX 75075
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Storage unit rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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 i ayment		The Instruction Guide explains how to com	nple	te this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 8/12 Rpt: 22/26		Conner Harrington Republican Women		00054608
4	Date	5	Payee name		•
	06/28/2025		Sunbelt Self Storage		
6	Amount (\$)	7	Payee address; City; State; Zip Cod	de	
	\$124.00		2445 W. Plano Pkwy.		
	Expenditure from corporate funds		Plano, TX 75075		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
					Check if Austin, TX, officeholder living expense Storage unit rent
					Storage unit rent
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office soug	tht	Office held
9	expenditure to benefit C/OI		Andidate/Officeriolder Hame Office Soug	JIIL	Office field
		_			
	Date		Payee name		
	01/03/2025		TFRW		
	Amount (\$)		Payee address; City; State; Zip Cod	de	
	\$101.20		P.O. Box 171146		
_	T Expenditure from				
L	corporate funds		Austin, TX 78717-0041		
	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 to TFRW
					Membership rees to TERM
	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office soug	tht	Office held
	expenditure to benefit C/OI		zandidate/Onicendider harne Onice soug	jiic	Office field
	Data				
	Date		Payee name TFRW		
	01/20/2025				
	Amount (\$)		Payee address; City; State; Zip Cod	de	
	\$75.90		P.O. Box 171146		
Г	Expenditure from				
	corporate funds		Austin, TX 78717-0041		
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE		Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					Membership fees to TFRW
	Complete ONLY if direct			ıht	Office held
	expenditure to benefit C/OI		5 5	,	2226.6

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

ng Expense Event Expense Loan Repayment/Reimbu

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

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

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

Candidate/Officenolder/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/12 Rpt: 23/26	Conner Harrington Republican Women 00054608
4 Date	5 Payee name
02/10/2025	TFRW
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$151.80	P.O. Box 171146
Expenditure from corporate funds	Austin, TX 78717-0041
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 Fees to TFRW for new members
	rees to trkw for flew filefillibers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/17/2025	TFRW
Amount (\$)	Payee address; City; State; Zip Code
\$304.50	P.O. Box 171146
Expenditure from corporate funds	Austin, TX 78717-0041
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 Silver Patron Club
	Sliver Patron Club
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/17/2025	TFRW
Amount (\$)	Payee address; City; State; Zip Code
\$126.50	P.O. Box 171146
Expenditure from corporate funds	Austin, TX 78717-0041
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Fees to TFRW for new members
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

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 comp	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 10/12 Rpt: 24/26	Conner Harrington Republican Women	00054608
4 Date	5 Payee name	
03/19/2025	TFRW	
6 Amount (\$)	7 Payee address; City; State; Zip Code)
\$151.80	P.O. Box 171146	
- Evnanditura from		
Expenditure from corporate funds	Austin, TX 78717-0041	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	D) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Fees to TFRW for new members
		rees to Trixw for flew filefillers
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	office held
expenditure to benefit C/O		Cince held
Date	B	
03/25/2025	Payee name TFRW	
Amount (\$)	Payee address; City; State; Zip Code	,
\$50.60	P.O. Box 171146	
Expenditure from	A TV 70747 0044	
corporate funds	Austin, TX 78717-0041	
PURPOSE OF	, (,	D) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fees to TFRW for new members
Complete ONLY if direct	Candidate/Officeholder name Office sough	ot Office held
expenditure to benefit C/OI	1	
Date	Payee name	
04/04/2025	TFRW	
Amount (\$)	Payee address; City; State; Zip Code	
\$126.50	P.O. Box 171146	
Expenditure from corporate funds	Austin, TX 78717-0041	
PURPOSE) Description
OF	(a) Category (See Categories listed at the top of this schedule)	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	1 665	Check if Austin, TX, officeholder living expense
		Fees to TFRW for new members
Complete ONLY if direct	Candidate/Officeholder name Office sough	ot 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

Candidate/Officeholder/Politica Credit Card Payment	d 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: 11/12 Rpt: 25/26	Conner Harrington Republican Women 00054608	
4 Date	5 Payee name	
04/10/2025	TFRW	
6 Amount (\$)	7 Payee address; City; State; Zip Code	П
\$26.35	P.O. Box 171146	
Expenditure from	Auctin TV 70717 0041	
corporate funds	Austin, TX 78717-0041	_
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
	Candidate/Officeholder/Political Committee	
	Tr TOV Scholarship land	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
oxportantaro to sorione or o		
Date	Payee name	
04/15/2025	TFRW	
Amount (\$)	Payee address; City; State; Zip Code	
\$25.30	P.O. Box 171146	
Expenditure from	Augtin TV 70717 0041	
corporate funds	Austin, TX 78717-0041	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Fees to TFRW for new member	
	Fees to TFRW for flew member	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experience to belief of or		
Date	Payee name	
05/14/2025	TFRW	
Amount (\$)	Payee address; City; State; Zip Code	_
\$25.30	P.O. Box 171146	
Expenditure from	Augstin, TV 70747, 0044	
corporate funds	Austin, TX 78717-0041	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Membership fees to TFRW	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experience to belieff C/OI		

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total marian Cabadida F1.	2 Files ID (Ethics Commission Files)
1 Total pages Schedule F1: Sch: 12/12 Rpt: 26/26	2 FILER NAME Conner Harrington Republican Women 3 Filer ID (Ethics Commission Filers) 00054608
4 Date	5 Payee name
02/21/2025	United States Treasury
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$56.48	Internal Revenue Service
Expenditure from	Ondon UT 04204 0020
corporate funds	Ogden, UT 84201-0039
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Taxes to IRS Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Taxes
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/19/2025	WordPress.com
Amount (\$)	Payee address; City; State; Zip Code
\$24.00	60 29th Street #343
Expenditure from corporate funds	San Francisco, CA 94110
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITUE	Advertising Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Website
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
03/03/2025	Wufoo
03/03/2023	
Amount (\$)	Payee address; City; State; Zip Code
\$372.03	3050 South Delaware
Expenditure from	Con Maton, CA 07702
corporate funds	San Mateo, CA 97703
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Website
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
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