FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00017039 3 COMMITTEE NAME **OFFICE USE ONLY** Concho Valley Republican Women's Club PAC Date Received **ELECTRONICALLY FILED** 01/29/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 60583 Change of Address San Angelo, TX 76906 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mrs. LaDonna NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Wallace CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER 415 S. Monroe STREET **ADDRESS** (Residence or Business) San Angelo, TX 76901 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 415 S. Monroe MAILING **ADDRESS** Change of Address San Angelo, TX 76901 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (325) 245-3765 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 12/26/2024 01/25/2025

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Concho Valley Repu	blican Women's Club PAC			000170	039
L4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		•	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
5 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PLEDGES, LOANS, CONTRIBUTIONS M	OR GUARANTEES (IADE ELECTRONIC	ALLY)	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI		NS GUARANTEES OF LOANS)	\$	575.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPEN	NDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURE	S	\$	4,497.65
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN		IAINTAINED AS OF THE LAST	T DAY \$	16,818.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A		UTSTANDING LOANS AS OF DD	THE \$	0.00
6 AFFIDAVIT				<u> </u>	
		true a	ar, or affirm, under penalty of p nd correct and includes all info Title 15, Election Code.		
			Mrs. LaDo	onna Walla	ce
			Signature of C	ampaign Tre	asurer
AFFIX NOTA	RY STAMP / SEAL ABOVE				
				this the	day
of	, 20, to certify \	which, witness my ha	and and seal of office.		
Signature of officer	administering oath	Printed name of office	cer administering oath	Title of	officer administering oath
J.ga.a. 0 01 0111001	g oddi		ig oan	. 160 01	

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3 3 of 11

		3 of 11		
17 COMMITTEE NAME	18 Filer ID	(Ethics Commission Filers)		
Concho Valley Republican Women's Club PAC 00017039				
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	·	SUBTOTAL AMOUNT		
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 575.00		
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTION	NS	\$ 0.00		
3. X SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00		
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION CORPORATION	OR LABOR	\$		
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM COLLABOR ORGANIZATION	ORPORATION OR	\$		
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LAB	OR ORGANIZATION	\$		
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OF ORGANIZATION	RLABOR	\$		
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR	LABOR ORGANIZATION	\$		
9. X SCHEDULE E: LOANS		\$ 0.00		
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRI	BUTIONS	\$ 4,497.65		
11. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00		
12. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CON-	TRIBUTIONS	\$ 0.00		
13. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00		
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONT	TRIBUTIONS	\$		
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTO FILER	UTIONS RETURNED	\$		

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E A1
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/11		
2	FILER NAME Concho Valle	IE alley Republican Women's Club PAC		3	Filer ID (Ethics Commission 00017039	n Filers)	
4	Date 12/30/2024	Full name of contributorDe Cordova, Cheryl (Mrs.)Contributor address; City; State;)	7	Amount of Contribution (\$)	\$35.00
		San Angelo, TX 76904					
8	Principal occu Assistant	pation / Job title (See Instructions)	9	Employer (See Instructions State Senator Charles P		у	
	Date 12/30/2024	Full name of contributor DeRusso, Michelle (Mrs.) Contributor address; City; State;)		Amount of Contribution (\$)	\$215.00
	Principal occu	San Angelo, TX 76905 Dation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						
	Date 12/30/2024	Full name of contributor DeRusso, Michelle (Mrs.) Contributor address; City; State;	out-of-state PAC (ID#: ; Zip Code)		Amount of Contribution (\$)	\$60.00
		San Angelo, TX 76905					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/30/2024	Full name of contributor Elder, Martha Contributor address; City; State; San Angelo, TX 76904	out-of-state PAC (ID#:;)		Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 12/30/2024	Full name of contributor McCrea, Beth (Ms.) Contributor address; City; State; San Angelo, TX 76901	out-of-state PAC (ID#:;			Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	()		
			'				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE	EDULE A1	
	The Instru	struction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 2/2 Rpt: 5/11		
2	FILER NAME Concho Vall	ley Republican Women's Club PAC		3	Filer ID (Ethics Commission 00017039	Filers)	
4	Date 12/30/2024	 5 Full name of contributor out-of-state PAC (ID#:_Mccarthy, Maria (Ms.) 6 Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$35.00	
_		San Angelo, TX 76902					
8	retired	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 12/30/2024	Full name of contributor out-of-state PAC (ID#:_ Pool, Kandi (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$45.00	
		San Angelo, TX 76904					
	Principal occu Realtor	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/30/2024	Full name of contributor out-of-state PAC (ID#:_ Read, Teddye (Mrs.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00	
		San Angelo, TX 76904					
		pation / Job title (See Instructions) I Comm Addairs	Employer (See Instructions Fox)			
	Date 12/30/2024	Full name of contributor out-of-state PAC (ID#:_ Singg, Sangeeta (Prof.) Contributor address; City; State; Zip Code San Angelo, TX 76901			Amount of Contribution (\$)	\$35.00	
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions Angelo State University)			

PLEI	DGED CONTRIBU	TIONS			SCHEDU	ILE B
Т	he Instruction Guide exp	lains how to comp	olete this form.	1	Total pages Schedule B: Sch: 1/1 Rpt: 6/11	
2 FILER NAME				3)
Concho	Valley Republican Women's	Club PAC			00017039	
4 TOTAL	. OF UNITEMIZED PLEDG	ES			\$	0.00
5 Date	6 Full name of pledgor	out-of-state PAC (II	D#:	_) 8	Amount of 9 In-kind descrip pledge (\$) (If applicable	tion
	7 Pledgor Address;	City; State; Zip Co	de		(applicable	-)
] [i Check if travel outside of Texas. Complet	e Schedule T
10 Principal	occupation / Job title (See Instru	ctions)	11 Employer (See In	struction	ons)	

	LOANS					SCHEDULE E
	The Instruction	on Guide explains ho	ow to complete this f	orm.	1	ages Schedule E: /1 Rpt: 7/11
2	FILER NAME Concho Valley F	Republican Women's Clu	ıb PAC		3 Filer ID 00017	(Ethics Commission Filers)
4		IITEMIZED LOANS				\$ 0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)
6	Is lender a financial institution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate
						11 Maturity Date
12	Principal occupati	I on / Job title (See Instructio	ns)	13 Employer (See Insti	ructions)	
14	Description of Col	lateral		15 Check if personal fu	nds were deposite	d into political account (See Instructions)
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
	not applicable	18 Guarantor address;	City; State;	Zip Code		
20	Principal occupati	on		21 Employer (See Insti	ructions)	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 1/4 Rpt: 8/11	Concho Valley Republican Women's Club PAC 00017039
4 Date	5 Payee name
01/10/2025	Angelo Awards
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$178.61	1605 W Ave N
Expenditure from corporate funds	San Angelo, TX 76904
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
	Naturalization awards
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/31/2024	Company Printing
Amount (\$)	Payee address; City; State; Zip Code
\$261.90	3419 Knickerbocker
Expenditure from	Con Angelo TV 70004
corporate funds	San Angelo, TX 76904
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
	Large checks for the Christmas Event
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
Date	Davies name
12/31/2024	Payee name Company Printing
	· · ·
Amount (\$)	Payee address; City; State; Zip Code
\$36.56	3419 Knickerbocker
Expenditure from corporate funds	San Angelo, TX 76904
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Table Numbers
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialiture to benefit C/Oi	1

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/4 Rpt: 9/11	Concho Valley Republican Women's Club PA	AC 00017039
4 Date	5 Payee name	•
01/21/2025	Constant Contact	
6 Amount (\$)	7 Payee address; City; State; Zip C	Code
\$24.52	Reservoir Place	
Expenditure from	1601 Trapelo Road	
corporate funds	Waltham, MA 02451	
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 Monthly Fee
		Worlding Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office so	L ought Office held
expenditure to benefit C/OI		
Date	Payee name	
01/15/2025	Family Shelter	
Amount (\$)	Payee address; City; State; Zip C	Code
\$2,000.00	P.O. Box 5018	
Expenditure from corporate funds	San Angelo, TX 76902	
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
		Donation
Complete ONLY if direct	Candidate/Officeholder name Office so	pught Office held
expenditure to benefit C/OI	1	
Date	Payee name	
01/24/2025	Intuit QB	
Amount (\$)	Payee address; City; State; Zip C	Code
\$402.95	2700 Coast Ave	
- Funanditura from		
Expenditure from corporate funds	Mountain View, CA 94043	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Credit Card Payment	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Computer program, Quick Books
		Computer program, Quick Books
Complete ONLY if direct	Candidate/Officeholder name Office so	L ought Office held
expenditure to benefit C/OI		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/4 Rpt: 10/11 Concho Valley Republican Women's Club PAC 00017039 4 Date Payee name 01/02/2025 TFRW (Texas Federation of Republican Women) 6 Amount (\$) Payee address; City; State; Zip Code 13740 N Hwy 183 \$1,416.80 Suite J4 Expenditure from Austin, TX 78750-1832 corporate funds **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/14/2025 TFRW (Texas Federation of Republican Women) Amount (\$) Payee address; City; State; Zip Code \$20.00 13740 N Hwy 183 Suite J4 Expenditure from Austin, TX 78750-1832 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Annual Membership fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/13/2025 **USPS** Amount (\$) Payee address: City; State; Zip Code \$89.60 Southwest Station Expenditure from corporate funds San Angelo, TX 76906 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Postage **EXPENDITURE** Check if Austin, TX, officeholder living expense Stamps Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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 Salaries/Wanes/Contract Lahor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officenoider/Politica 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: 4/4 Rpt: 11/11	Concho Valley Republican Women's Club PAC 00017039
4 Date	5 Payee name
01/14/2025	USPS
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$28.00	Southwest Station
Expenditure from corporate funds	San Angelo, TX 76906
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
	Postage for event
	. 33.8gc .3. 3.3.8
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
D-11-	
Date	Payee name
01/13/2025	Vonage
Amount (\$)	Payee address; City; State; Zip Code
\$38.71	23 Main Street
— Evanditura from	
Expenditure from corporate funds	Horndel, NJ 07733
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.
L/II LIIDI. G.I.L	Check if Austin, TX, officeholder living expense
	Monthly fee
2 1 2 2 1 1 2 1 1 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	·