#### 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) 00070644 3 COMMITTEE NAME **OFFICE USE ONLY** East Montgomery County Republican Women - PAC Date Received **ELECTRONICALLY FILED** 07/09/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P O Box 292 Date Hand-delivered or Date Postmarked New Caney, TX 77357 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Karen NAME NICKNAME LAST **SUFFIX** White STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 20612 Southwood Oaks Drive STREET **ADDRESS** (Residence or Business) Porter, TX 77365 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 20612 Southwood Oaks Drive MAILING **ADDRESS** Porter, TX 77365 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 859-8186 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** 01/01/2025 **THROUGH** 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

12	COMMITTEE NAME			13 Filer ID	(Ethics Commission File	ers)
	East Montgomery Coun	ty Republican Women	- PAC	00070644	ļ	
	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.)				
	CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M X check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$		0.00
		2. TOTAL POLITICA (OTHER THAN PLE	IL CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$		0.00
	EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$		0.00
		4. TOTAL POLITICA	L EXPENDITURES	\$		0.00
	CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$		0.00
	OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$		0.00
16	AFFIDAVIT			<u> </u>		
			I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.			
			Karen	n White		
			Signature of Car	mpaign Treasu	urer	_
	AFFIX NOTARY	STAMP / SEAL ABOVE				
	Sworn to and subscribed	before me, by the said	, th	nis the	day	
	of	, 20, to certify \	which, witness my hand and seal of office.			
	Signature of officer adr	ministering oath	Printed name of officer administering oath	Title of offi	cer administering oath	-
	orginator or officer dur	Storing Saur		1100010111	oo. dammiotoring oddi	

### **SUBTOTALS - GPAC**

### FORM **GPAC**COVER SHEET PG 3

	3 of 26			
	17 COMMITTEE NAME18 Filer ID(Ethics Commission Filers)East Montgomery County Republican Women - PAC00070644			
	19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE			
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION 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 (	ORGANIZATION	\$	
9.	SCHEDULE E: LOANS		\$	
10.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	
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	ONS	\$ 3,021.94	
15. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	<b>\$</b> 2,398.94	

The Instruction Guide explains how to complete this form.		
Total pages Schedule I:     Sch: 1/11 Rpt:	2 FILER NAME East Montgomery County Republican Women - PAC 3 Filer ID (Ethics Commission Filers) 00070644	
4 Date	5 Payee name	
03/22/2025	AT&T Hotel & Convention Center	
6 Amount (\$)	7 Payee Address; City; State; Zip	
717.16	1900 University Ave	
Expenditure from corporate funds	Austin, TX 78705	
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)	
OF EXPENDITURE	Event Expense Hotel for TFRW Legislative Day & Board Meeting	
Date	Payee name	
02/11/2025	Amazon	
Amount (\$)	Payee Address; City; State; Zip	
27.00	410 Terry Ave N	
Expenditure from		
corporate funds	Seattle, WA 98109	
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)	
OF EXPENDITURE	Event Expense General Meeting Experience	
Date	Payee name	
03/21/2025	Amazon	
Amount (\$)	Payee Address; City; State; Zip	
21.64	410 Terry Ave N	
Expenditure from		
corporate funds	Seattle, WA 98109	
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)	
OF EXPENDITURE	Office Overhead/Rental Expense Patriotic Postcards	
Date	Payee name	
03/02/2025	Amazon	
Amount (\$)	Payee Address; City; State; Zip	
32.46	410 Terry Ave N	
Expenditure from		
corporate funds	Seattle, WA 98109	
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)	
OF EXPENDITURE	Office Overhead/Rental Expense Clear Plastic Display Stands for General Meeting	
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The Instruction Guide explains how to complete this form.		
Total pages Schedule I: Sch: 2/11 Rpt:	2 FILER NAME East Montgomery County Republican Women - PAC 3 Filer ID (Ethics Commission Filers) 00070644	
4 Date	5 Payee name	
04/08/2025	Chick Fil A	
6 Amount (\$)	7 Payee Address; City; State; Zip	
67.66	11877 N Grand Pkwy E	
Expenditure from corporate funds	New Caney, TX 77357	
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)	
OF EXPENDITURE	Event Expense General Meeting Expenditure	
Date	Payee name	
04/08/2025	Chick Fil A	
Amount (\$)	Payee Address; City; State; Zip	
38.43	11877 N Grand Pkwy E	
Expenditure from corporate funds	New Caney, TX 77357	
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)	
OF EXPENDITURE	Event Expense General Meeting Expenditure	
EXPENDITORE		
Date	Payee name	
03/19/2025	Dollar Tree	
Amount (\$)	Payee Address; City; State; Zip	
16.24	7034 FM 1960 Rd E	
Expenditure from		
corporate funds	Humble, TX 77346	
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)	
OF EXPENDITURE	Event Expense General Meeting Expenditure	
Date	Payee name	
05/12/2025	Dollar Tree	
Amount (\$)	Payee Address; City; State; Zip	
11.10	7034 FM 1960 Rd E	
Expenditure from		
corporate funds	Humble, TX 77346	
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)	
OF EXPENDITURE	Event Expense General Meeting Expenditure	

<ul> <li>Total pages Schedule I: Sch: 3/11 Rpt:</li> <li>Date 04/30/2025</li> <li>Amount (\$)</li> </ul>	The Instruction Guide explains how to complete this form.  2 FILER NAME  3 Filer ID (Ethics Commission Filers)
Sch: 3/11 Rpt:  4 Date 04/30/2025  6 Amount (\$)	- · · · · · · · · · · · · · · · · · ·
4 Date 04/30/2025 6 Amount (\$)	l ·
04/30/2025 <b>6</b> Amount (\$)	East Montgomery County Republican Women - PAC 00070644
6 Amount (\$)	5 Payee name
	Dollar Tree
	7 Payee Address; City; State; Zip
27.06	7034 FM 1960 Rd E
Expenditure from corporate funds	Humble, TX 77346
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Event Expense General Meeting Expense
Date	Payee name
01/16/2025	GHCFRW
Amount (\$)	Payee Address; City; State; Zip
180.00	7941 Katy Freeway #272
Expenditure from	
corporate funds	Houston, TX 78024
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Event Expense Original Nuts N Bolts 2025 for EMCRW Board Members
	Wellbers
Date	Payee name
02/01/2025	GHCFRW
Amount (\$)	Payee Address; City; State; Zip
30.00	7941 Katy Freeway #272
Expenditure from	
corporate funds	Houston, TX 78024
PURPOSE	
EXPENDITURE	Event Expense Nuts N Bolts Training
Date	Payee name
02/13/2025	GHCFRW
	Payee Address; City; State; Zip
Amount (\$)	7941 Katy Freeway #272
`,	
32.00	
`,	Houston, TX 78024
32.00  Expenditure from corporate funds  PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
32.00  Expenditure from corporate funds	
32.00  Expenditure from corporate funds  PURPOSE  OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
32.00  Expenditure from corporate funds  PURPOSE  OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
32.00  Expenditure from corporate funds  PURPOSE  OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
32.00  Expenditure from corporate funds  PURPOSE  OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE Date	Event Expense  Nuts N Bolts Training  Payee name GHCFRW  Payee Address; City; State; Zip

The Instruction Guide explains how to complete this form.		
Total pages Schedule I:     Sch: 4/11 Rpt:	2 FILER NAME East Montgomery County Republican Women -	PAC Selection (Ethics Commission Filers)
4 Date	5 Payee name	
02/13/2025	GHCFRW	
6 Amount (\$)	7 Payee Address; City; State; Zip	
32.00	7941 Katy Freeway #272	
Expenditure from corporate funds	Houston, TX 78024	
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories)	·
OF EXPENDITURE	Event Expense	Nuts Bolts Training
Date	Payee name	
02/07/2025	HEB	
Amount (\$)	Payee Address; City; State; Zip	
34.90	19529 Northpark	
Expenditure from	L TV 77000	
corporate funds	Kingwood, TX 77339	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)	·
EXPENDITURE	Event Expense	General Meeting Expenditure
Date	Payee name	
01/16/2025	Hobby Lobby	
Amount (\$)	Payee Address; City; State; Zip	
15.13	22124 Market Place Dr	
Expenditure from		
corporate funds	New Caney, TX 77357	
corporate rande		
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	·
		(b) Description (See instructions regarding type of information required.)  January Meeting
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)	·
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)	·
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	·
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense  Payee name	·
PURPOSE OF EXPENDITURE  Date 02/11/2025  Amount (\$)	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense  Payee name Kroger	·
PURPOSE OF EXPENDITURE  Date 02/11/2025	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense  Payee name Kroger  Payee Address; City; State; Zip 22030 Market Place Dr.	·
PURPOSE OF EXPENDITURE  Date 02/11/2025  Amount (\$) 3.99	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense  Payee name Kroger  Payee Address; City; State; Zip 22030 Market Place Dr.  New Caney, TX 77357	January Meeting
PURPOSE OF EXPENDITURE  Date 02/11/2025  Amount (\$) 3.99  Expenditure from corporate funds PURPOSE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense  Payee name Kroger  Payee Address; City; State; Zip 22030 Market Place Dr.  New Caney, TX 77357  (a) Category (See instructions for examples of acceptable categories)	January Meeting  (b) Description (See instructions regarding type of information required.)
PURPOSE OF EXPENDITURE  Date 02/11/2025  Amount (\$)  3.99  Expenditure from corporate funds	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense  Payee name Kroger  Payee Address; City; State; Zip 22030 Market Place Dr.  New Caney, TX 77357	January Meeting
PURPOSE OF EXPENDITURE  Date 02/11/2025  Amount (\$) 3.99  Expenditure from corporate funds  PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense  Payee name Kroger  Payee Address; City; State; Zip 22030 Market Place Dr.  New Caney, TX 77357  (a) Category (See instructions for examples of acceptable categories)	January Meeting  (b) Description (See instructions regarding type of information required.)
PURPOSE OF EXPENDITURE  Date 02/11/2025  Amount (\$) 3.99  Expenditure from corporate funds  PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense  Payee name Kroger  Payee Address; City; State; Zip 22030 Market Place Dr.  New Caney, TX 77357  (a) Category (See instructions for examples of acceptable categories)	January Meeting  (b) Description (See instructions regarding type of information required.)
PURPOSE OF EXPENDITURE  Date 02/11/2025  Amount (\$) 3.99  Expenditure from corporate funds  PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense  Payee name Kroger  Payee Address; City; State; Zip 22030 Market Place Dr.  New Caney, TX 77357  (a) Category (See instructions for examples of acceptable categories)	January Meeting  (b) Description (See instructions regarding type of information required.)
PURPOSE OF EXPENDITURE  Date 02/11/2025  Amount (\$) 3.99  Expenditure from corporate funds  PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense  Payee name Kroger  Payee Address; City; State; Zip 22030 Market Place Dr.  New Caney, TX 77357  (a) Category (See instructions for examples of acceptable categories)	January Meeting  (b) Description (See instructions regarding type of information required.)
PURPOSE OF EXPENDITURE  Date 02/11/2025  Amount (\$) 3.99  Expenditure from corporate funds  PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense  Payee name Kroger  Payee Address; City; State; Zip 22030 Market Place Dr.  New Caney, TX 77357  (a) Category (See instructions for examples of acceptable categories)	January Meeting  (b) Description (See instructions regarding type of information required.)

#### SCHEDULE |

	The Instruction Guide explains how to comp	olete this form.
1 Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/11 Rpt:	East Montgomery County Republican Women - PAC	00070644
4 Date	5 Payee name	•
05/13/2025	Kroger	
6 Amount (\$)	7 Payee Address; City; State; Zip	
33.02	22030 Market Place Dr.	
Expenditure from	TV 770F7	
corporate funds	New Caney, TX 77357	
8 PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) (b) Des Food/Beverage Expense Ge	scription (See instructions regarding type of information required.) rneral Meeting Expenditure
EXPENDITURE	CC	Heral Meeting Experiations
Date	Payee name	
01/16/2025	LaMichoacana	
Amount (\$)	Payee Address; City; State; Zip	
32.07	23529 FM 1314 RD	
Expenditure from		
corporate funds	Porter, TX 77365	
PURPOSE OF		scription (See instructions regarding type of information required.)
EXPENDITURE	Jai	nuary General Meeting Expenditure
Date	Payee name	
01/16/2025	MCRW	
Amount (\$)	Payee Address; City; State; Zip	
175.00	P.O. Box 1766	
Expenditure from	Copros TV 77205	
corporate funds	Conroe, TX 77305	(Con instructions regarding two of information required)
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)  Event Expense  AB	scription (See instructions regarding type of information required.)  C's of Leadership Training for Board Members
EXPENDITURE	Zveni Zxpeniec // Z	C 3 of Leadership Training for Board Members
Date	Payee name	
01/16/2025	Moore	
Amount (\$)	Payee Address; City; State; Zip	
25.00	Crystal	
Expenditure from	17106 Leon Ct	
corporate funds	Splendora, TX 77372	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)  Event Expense  Nui	•
EXPENDITURE	Lverii Experise	ts & Bolts Training
	<u> </u>	

	The Instruction Guide explains how to complete this form.
Total pages Schedule I:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/11 Rpt:	East Montgomery County Republican Women - PAC 00070644
4 Date	5 Payee name
03/05/2025	Party City
6 Amount (\$)	7 Payee Address; City; State; Zip
14.07	20542 Highway 59 N
Expenditure from corporate funds	Humble, TX 77338
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Event Expense General Meeting Expense
Dete	Davida marta
Date 02/19/2025	Payee name SaleQuick
	-
Amount (\$)	Payee Address; City; State; Zip 606 Everett St
1.00	ood Evereu St
Expenditure from corporate funds	Conroe, TX 77301
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Accounting/Banking Merchant Services Charge
LAI LIIDITORE	
Dete	David states
Date 02/09/2025	Payee name Sam's
Amount (\$)	Payee Address; City; State; Zip 9665 Fm 1960 Bypass
10.98	3003 T III 1300 Dypuss
Expenditure from corporate funds	Humble, TX 77338
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Food/Beverage Expense General Meeting Expenditure
5.	
Date 04/08/2025	Payee name Sam's
Amount (\$)	Payee Address; City; State; Zip 9665 Fm 1960 Bypass
24.96	3003 T III 1300 Dypass
Expenditure from corporate funds	Humble, TX 77338
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Event Expense General Meeting Expenditure

#### SCHEDULE |

	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 7/11 Rpt:	East Montgomery County Republican Women - PA	AC 00070644
4 Date	5 Payee name	•
01/21/2025	TFRW	
6 Amount (\$)	7 Payee Address; City; State; Zip	
151.80	13740 US 183 J4	
Expenditure from corporate funds	Austin, TX 78750	
8 PURPOSE	1	Description (See instructions regarding type of information required.)
OF EXPENDITURE	Fees	Membership fees
Date	Payee name	
02/16/2025	TFRW	
Amount (\$)	Payee Address; City; State; Zip	
75.90	13740 US 183 J4	
Expenditure from	Auctin TV 79750	
corporate funds	Austin, TX 78750  (a) Category (See instructions for examples of acceptable categories) (b)	Description (See instructions regarding type of information required.)
PURPOSE OF	1,,	Description (See instructions regarding type of information required.)  Membership Fee
EXPENDITURE		Wienibership i de
Date	Payee name	
03/12/2025	TFRW	
Amount (\$)	Payee Address; City; State; Zip	
94.06	13740 US 183 J4	
Expenditure from	Austin, TX 78750	
corporate funds	(a) Category (See instructions for examples of acceptable categories) (b)	Description (See instructions regarding type of information required.)
PURPOSE OF	1	TFRW Legislation Day Austin TX
EXPENDITURE		Treve Logislation Day Adotti 178
Date	Payee name	
03/25/2025	TFRW	
Amount (\$)	Payee Address; City; State; Zip	
390.94	13740 US 183 J4	
Expenditure from		
corporate funds	Austin, TX 78750	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) (b) Event Expense	Description (See instructions regarding type of information required.) TFRW Board Meeting Legislative Day
EXPENDITURE	Event Expense	Trkw board weeting Legislative Day

	The Instruction Guide explains how to complete this form.
1 Total pages Schedule I:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/11 Rpt:	East Montgomery County Republican Women - PAC 00070644
4 Date	5 Payee name
03/25/2025	TFRW
6 Amount (\$)	7 Payee Address; City; State; Zip
208.65	13740 US 183 J4
Expenditure from corporate funds	Austin, TX 78750
8 PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
EXPENDITURE	Event Expense Table Sponsor
Date	Payee name
04/15/2025	TFRW
Amount (\$)	Payee Address; City; State; Zip
101.20	13740 US 183 J4
Expenditure from	4 11 71 70770
corporate funds	Austin, TX 78750
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)  Fees  Membership
EXPENDITURE	Fees Membership
Date	Payee name
05/15/2025	TFRW
Amount (\$)	Payee Address; City; State; Zip
151.80	13740 US 183 J4
Expenditure from	Auctin TV 79750
corporate funds	Austin, TX 78750  (a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
PURPOSE OF	Fees TFRW Membership
EXPENDITURE	
Date	Payee name
04/16/2025	TJ Maxx
Amount (\$)	Payee Address; City; State; Zip
14.06	2916 Interstate 45 North
Expenditure from	Conroe, TX 77303
corporate funds	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
PURPOSE OF	Gift/Awards/Memorials Expense Gift
EXPENDITURE	

The Instruction Guide explains how to complete this form.		
1 Total pages Schedule I: Sch: 9/11 Rpt:	2 FILER NAME East Montgomery County Republican Women - PAC 3 Filer ID (Ethics Commission Filers) 00070644	
4 Date 03/25/2025	5 Payee name Texas Capital Giftshop	
6 Amount (\$)  55.21  Expenditure from corporate funds  8 PURPOSE OF EXPENDITURE	7 Payee Address; City; State; Zip 1400 Congress Ave Ste E1.006 Austin, TX 78701  (a) Category (See instructions for examples of acceptable categories) Event Expense  (b) Description (See instructions regarding type of information required.) General Meeting Experience	
Date 02/14/2025	Payee name USPS	
Amount (\$)  29.20  Expenditure from	Payee Address; City; State; Zip 23550 Partners Way  Porter, TX 77365	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense  (b) Description (See instructions regarding type of information required.) Stamps	
Date 01/16/2025	Payee name Vanessa, Moore	
Amount (\$)  25.00  Expenditure from	Payee Address; City; State; Zip 17106 Leon Ct	
Corporate funds  PURPOSE  OF  EXPENDITURE	Splendora, TX 77372  (a) Category (See instructions for examples of acceptable categories)  Event Expense  (b) Description (See instructions regarding type of information required.)  Nuts N Bolts Training	
Date 03/02/2025	Payee name Walmart	
Amount (\$)  21.66  Expenditure from corporate funds	Payee Address; City; State; Zip 23561US 59 Porter, TX 77365	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense (b) Description (See instructions regarding type of information required.) Donation for General Meeting	
	<u>'</u>	

#### SCHEDULE |

	The Instruction Guide explains how to complete this form.
1 Total pages Schedule I:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 10/11 Rpt:	East Montgomery County Republican Women - PAC 00070644
4 Date	5 Payee name
03/05/2025	Walmart
6 Amount (\$)	7 Payee Address; City; State; Zip
11.55	6626 FM 1960 Rd E
Expenditure from	
corporate funds	Humble, TX 77346
8 PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)  Event Expense  (b) Description (See instructions regarding type of information required.)  General Meeting Expenditure
EXPENDITURE	General Weeting Experiation
Date	Payee name
04/08/2025	Walmart
Amount (\$)	Payee Address; City; State; Zip
5.84	23561 US 59
Expenditure from	Destan TV 77005
corporate funds	Porter, TX 77365
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)  Event Expense  (b) Description (See instructions regarding type of information required.)  General Meeting Expenditure
EXPENDITURE	General Meeting Expenditure
Date	Payee name
05/02/2025	Walmart
Amount (\$)	Payee Address; City; State; Zip
49.72	23561 US 59
Expenditure from	Porter, TX 77365
corporate funds  PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF	Gift/Awards/Memorials Expense  General Meeting Expenditure
EXPENDITURE	
Date	Payee name
01/16/2025	Wreaths Across America
Amount (\$)	Payee Address; City; State; Zip
17.00	4 Point Street
Expenditure from	PO BOX 249
corporate funds	Columbia Falls, ME 04623
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)  Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee

	AL EXPENDITURES POLITICAL CONTRIBUTIONS	SCHEDULE I								
The Instruction Guide explains how to complete this form.										
Total pages Schedule I:     Sch: 11/11 Rpt:	2 FILER NAME East Montgomery County Republican Women - PAC	3 Filer ID (Ethics Commission Filers) 00070644								
4 Date 02/28/2025	5 Payee name Zazzle Inc									
6 Amount (\$)  15.48  Expenditure from corporate funds	7 Payee Address; City; State; Zip 1200 Chestnut St  Menio Park, CA 94025									
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense  (b) Description Name Tag	(See instructions regarding type of information required.) for Trish Cranny								

	The Instru	ctic	on Guide explains how to complete this form.	1			ages Schedule K: /12 Rpt: 15/26	
2	FILER NAME	mo	vay County Depublican Woman DAC				(Ethics Commission File	rs)
	East Montgo	me	ry County Republican Women - PAC		UU	070	044	
4	Date 05/14/2025	6	Name of person from whom amount is received Allgood, Jamie Address of person from whom amount is received; City; State; Zip Code				8 Amount (\$) \$4	10.01
			Porter, TX 77365					
		7	Purpose for which amount is received Cher Membership	eck if polition	cal c	contri	ibution returned to filer	
	Date	Г	Name of person from whom amount is received				Amount (\$)	
	04/07/2025		Almond, Trish					00.00
	04/01/2025	ļ					Φ10	0.00
			Address of person from whom amount is received; City; State; Zip Code					
			Porter, TX 77365					
		H	Purpose for which amount is received	ock if politic	ral c	contr	ibution returned to filer	
			Membership & Donation	ck ii politic	Jai C	JOHU	ibution returned to lilei	
			Weinbership & Donation					
	Date		Name of person from whom amount is received				Amount (\$)	
	01/16/2025		Atkins, Joanna				\$5	0.00
		ļ	Address of person from whom amount is received; City; State; Zip Code					
			The action of person more amount to room only only, only, only					
			Porter, TX 77365					
		L						
			<del></del>	ck if politic	cal c	contr	ibution returned to filer	
			Donation					
	Date		Name of person from whom amount is received				Amount (\$)	
	01/16/2025		Atkins, Joanna				\$2	20.00
		ļ	Address of person from whom amount is received; City; State; Zip Code					
			Address of person from whom amount is received. City, State, 2ip Code					
			Dortor, TV 77965					
		L	Porter, TX 77365					
			<del></del>	ck if polition	cal c	contr	ibution returned to filer	
			Donation					
	Date	Τ	Name of person from whom amount is received				Amount (\$)	
	04/08/2025		Atkins, Joanna					3.00
	0 1/00/2020	ļ					•	0.00
			Address of person from whom amount is received; City; State; Zip Code					
			Porter, TX 77365					
			Purpose for which amount is received	ck if politic	cal c	contr	ibution returned to filer	
			Donation	•				

L							
	The Instru	ction Guide explains how to complete this form.	1			ages Schedule K:	
L				S	ch: 2/	/12 Rpt: 16/26	
2	FILER NAME		3			(Ethics Commission F	Filers)
L	East Montgo	omery County Republican Women - PAC		00	00706		
4	Date	5 Name of person from whom amount is received				8 Amount (\$)	
l	05/28/2025	Bush, Melanie K					\$25.00
l		6 Address of person from whom amount is received; City; State; Zip Code					
l							
l		Conroe, TX 77384					
l		<u> </u>	hook if polit	iool	contri	ibution returned to filer	
l		Membership	песк п рош	licai	COILLI	ibution returned to liler	
⊨		· ·					
l	Date	Name of person from whom amount is received				Amount (\$)	<b>#</b> 20.00
	04/08/2025	Byers, Amy					\$20.00
l		Address of person from whom amount is received; City; State; Zip Code					
		Conroe, TX 77304					
l		_	heck if nolit	ical	contri	ibution returned to filer	
		Donation	neek ii polit	ioui	COILLI	isation retained to mer	
F	Date	Name of person from whom amount is received			1	Amount (\$)	
l	02/14/2025	Name of person from whom amount is received  Curry, Connie				Amount (\$)	\$10.00
	02/14/2023						Ψ10.00
		Address of person from whom amount is received; City; State; Zip Code					
		Porter, TX 77365					
		Purpose for which amount is received	heck if polit	tical	contri	ibution returned to filer	
		Donation					
F	Date	Name of person from whom amount is received				Amount (\$)	
l	03/20/2025	DePina, Karen					\$38.80
		Address of person from whom amount is received; City; State; Zip Code					
l		Kingwood, TX 77339					
		<u> </u>	heck if polit	tical	contri	ibution returned to filer	
L		Membership					
Г	Date	Name of person from whom amount is received			Ī	Amount (\$)	
l	05/14/2025	Doolittle, Sherry					\$24.34
l		Address of person from whom amount is received; City; State; Zip Code					
l							
		Montgomery, TX 77316					
		<u> </u>	heck if polit	tical	contri	ibution returned to filer	
L		Membership					
l							

	The Instru	ction Guide explains how to complete this form.	1			ages Schedule K: 3/12 Rpt: 17/26	
2	FILER NAME		3	3	Filer ID	(Ethics Commission File	ers)
	East Montgo	mery County Republican Women - PAC			00070	0644	
4	Date	5 Name of person from whom amount is received	I			8 Amount (\$)	
	01/16/2025	Epwop, Martin					19.45
		6 Address of person from whom amount is received; City; State; Zip Code					
		Address of person from whom amount is received, City, State, 21p Code					
		Conroe, TX 77385					
			Check if noli	tic	al cont	I ribution returned to filer	
		Donation	Check ii poli	lic	ai com	indution returned to file	
⊨		Bondion				•	
	Date	Name of person from whom amount is received				Amount (\$)	
	01/16/2025	Etwop, Martin				\$	24.24
		Address of person from whom amount is received; City; State; Zip Code					
		Conroe, TX 77385					
		Purpose for which amount is received	Check if poli	tic	al cont	ribution returned to filer	
		Membership					
	Date	Name of person from whom amount is received				Amount (\$)	
	04/23/2025	Everett, Pat					40.00
		Address of person from whom amount is received; City; State; Zip Code					
		Address of person from whom amount is received, City, State, 21p code					
		Montgomery, TX 77316					
		Purpose for which amount is received	Check if poli	tic	al cont	ribution returned to filer	
		Membership					
F	Date	Name of person from whom amount is received				Amount (\$)	
	01/16/2025	Everett, Sandy				` '	15.00
	01/10/2023	,					13.00
		Address of person from whom amount is received; City; State; Zip Code					
		Montgomery, TX 77316					
		Purpose for which amount is received	Chaptrif mali	4: -	al aant	with this is weath to sell as files.	
		Donation	Check ii poli	lic	ai cont	ribution returned to filer	
L		Donation					
	Date	Name of person from whom amount is received				Amount (\$)	
	04/10/2025	Everett, Sandy				\$2	49.36
		Address of person from whom amount is received; City; State; Zip Code					
1							
1							
1		Montgomery, TX 77316			_		
		Purpose for which amount is received	Check if poli	tic	al cont	ribution returned to filer	
1		Event TFRW ABC's Leadership					
Г							
l							

	The Instru	ction Guide explains how to complete this form.	1		ages Schedule K: I/12 Rpt: 18/26	
2	FILER NAME		3	Filer ID	(Ethics Commission	Filers)
	East Montgo	mery County Republican Women - PAC		00070	0644	
4	Date	5 Name of person from whom amount is received	!		8 Amount (\$)	
	01/16/2025	Faubel, Julie			, ,	\$25.00
		6 Address of person from whom amount is received; City; State; Zip Code				
		Address of person from whom amount is received, City, State, 21p code				
		Montgomery, TX 77356				
			. :6		wiles, skiene wests was end to file w	
		Membership	с п роши	ai conu	ribution returned to filer	
		Wernbership				
	Date	Name of person from whom amount is received			Amount (\$)	
	04/08/2025	Faubel, Julie				\$5.00
		Address of person from whom amount is received; City; State; Zip Code		•••••	1	
		Montgomery, TX 77356				
		Purpose for which amount is received	c if polition	al conti	ribution returned to filer	
		Donation				
	Date	Name of person from whom amount is received			Amount (\$)	
	01/16/2025	Fite, Tammy			Amount (ψ)	\$40.00
	01/10/2020					φ-10.00
		Address of person from whom amount is received; City; State; Zip Code				
		New Caney, TX 77357				
		<u> </u>	r if politic	al conti	I ribution returned to filer	
		Membership	t ii poiitit	ai com	indution returned to mer	
		·			<u> </u>	
	Date	Name of person from whom amount is received			Amount (\$)	
	01/16/2025	Gilbert, Tracy				\$25.00
		Address of person from whom amount is received; City; State; Zip Code				
		Conroe, TX 77301				
		Purpose for which amount is received	c if polition	al conti	ribution returned to filer	
		Membership				
	Date	Name of person from whom amount is received			Amount (\$)	
	02/13/2025	Guerrero, Rosalinda				\$20.00
		Address of person from whom amount is received; City; State; Zip Code			•	
		· · · · · · · · · · · · · · · · · · ·				
		Porter, TX 77365				
			c if politic	al conti	I ribution returned to filer	
		Membership	ponuc	a oon		

	The Instru	ction Guide explains how to complete this form.	1		pages Schedule K: 5/12 Rpt: 19/26	
2	FILER NAME		3			ilers)
		mery County Republican Women - PAC		00070	•	,
4	Date	5 Name of person from whom amount is received			8 Amount (\$)	
-	05/15/2025	Guillot, Roberta			<b>σ</b> Amount (φ)	\$5.00
	03/13/2023					Ψ3.00
		6 Address of person from whom amount is received; City; State; Zip Code				
		Porter, TX 77365				
			- 1141			
		7 Purpose for which amount is received	Olitio	cal cont	ribution returned to filer	
		Donation				
	Date	Name of person from whom amount is received			Amount (\$)	
	05/13/2025	Guillot, Roberta				\$38.99
		Address of person from whom amount is received; City; State; Zip Code				
		Porter, TX 77365				
		Purpose for which amount is received	olitio	cal cont	ribution returned to filer	
		Membership				
	Date	Name of person from whom amount is received			Amount (\$)	
	03/06/2025	Harrell, Elizabeth				\$40.00
		Address of person from whom amount is received; City; State; Zip Code			-	
		Address of person from whom amount is received, Sity, State, 2ip Gode				
		New Caney, TX 77357				
		Purpose for which amount is received Check if p	olitio	cal cont	ribution returned to filer	
		Membership				
=	Date	Name of person from whom amount is received			Amount (\$)	
	01/16/2025	Hayden, Jerry			/ (+)	\$6.00
	01/10/2020	Address of person from whom amount is received; City; State; Zip Code				Ψ0.00
		Address of person from whom amount is received, City, State, Zip Code				
		Cleveland, TX 77328				
			olitic	ral cont	I ribution returned to filer	
		Donation Check ii pi	Ontic	Jai Com	indution returned to mer	
_					1	
	Date	Name of person from whom amount is received			Amount (\$)	ΦΕΟ ΟΟ
	01/16/2025	Hayden, Jerry				\$50.00
		Address of person from whom amount is received; City; State; Zip Code				
		Observational TV 77000				
		Cleveland, TX 77328				
			olitio	cal cont	ribution returned to filer	
		Membership				
1						

	The Instru	ctio	on Guide explains how to complete this form.	1		pages Schedule K: 6/12 Rpt: 20/26	
2	FILER NAME			3			=ilers)
_			ry County Republican Women - PAC		00070	`	11013)
4	Date		Name of person from whom amount is received			8 Amount (\$)	
4	05/13/2025		Hayden, Vera			δ Amount (φ)	\$40.00
	03/13/2023	ļ					Ψ40.00
		١٥	Address of person from whom amount is received; City; State; Zip Code				
			Splendora, TX 77372				
		7		c if politic	ral cont	ribution returned to filer	
			Membership	t ii poiitii	JUL 0011	indution retarried to mer	
_	Data	<u>                                     </u>	·			Amount (ft)	
	Date 02/14/2025		Name of person from whom amount is received Hudson, Sarah			Amount (\$)	\$40.00
	02/14/2023	ļ					Φ40.00
			Address of person from whom amount is received; City; State; Zip Code				
			Conroe, TX 77302				
		$\vdash$		c if politic	cal cont	ribution returned to filer	
			Membership	· · · ponti			
	Date	<u> </u>	Name of person from whom amount is received			Amount (\$)	
	02/14/2025		Juneau, Holly			Amount (\$)	\$52.97
	02/14/2020	ļ	Address of person from whom amount is received; City; State; Zip Code				Ψ02.01
			Address of person from whom amount is received, City, State, 2:p Code				
			Porter, TX 77365				
			Purpose for which amount is received	c if polition	cal cont	ribution returned to filer	
			Membership				
	Date	Ì	Name of person from whom amount is received			Amount (\$)	
	03/25/2025		Kimball, Earle				\$40.00
		ļ	Address of person from whom amount is received; City; State; Zip Code			-	
			Porter, TX 77365				
			<del></del>	c if polition	cal cont	ribution returned to filer	
			Membership & Donation				
	Date		Name of person from whom amount is received			Amount (\$)	
	02/07/2025		Mack, Wayne				\$25.00
			Address of person from whom amount is received; City; State; Zip Code		•••••	1	
			Conroe, TX 77305				
			<del></del>	c if polition	cal cont	ribution returned to filer	
			Membership				

	The Instru	ction Guide explains how to complete this form.	1			ages Schedule K: /12 Rpt: 21/26	
2	FILER NAME		3			<u> </u>	ilers)
		mery County Republican Women - PAC		000		•	,
4	Date	5 Name of person from whom amount is received	<u> </u>			8 Amount (\$)	
-	05/13/2025	Magarahan, Mary					\$40.00
		6 Address of person from whom amount is received; City; State; Zip Code					
		7 Address of person from whom amount is received, Sity, State, 219 South					
		Conroe, TX 77306					
		7 Purpose for which amount is received Check if p	olitio	cal c	ontr	ibution returned to filer	
		Membership					
_	Date	Name of person from whom amount is received				Amount (\$)	
	01/16/2025	Maggo, Pearl					\$25.00
		Address of person from whom amount is received; City; State; Zip Code					
		Address of person from whom amount is received, Gity, State, 219 Code					
		Conroe, TX 77384					
		Purpose for which amount is received Check if p	olitio	cal c	ontr	ibution returned to filer	
		Membership					
	Date	Name of person from whom amount is received			Ī	Amount (\$)	
	04/08/2025	Maggo, Pearl					\$25.00
		Address of person from whom amount is received; City; State; Zip Code	•••••				
		, , , , , , , , , , , , , , , , , , ,					
		Conroe, TX 77384					
		Purpose for which amount is received	olitio	cal c	ontr	ibution returned to filer	
		Donation					
	Date	Name of person from whom amount is received				Amount (\$)	
	03/06/2025	McRae, Tammy					\$25.00
		Address of person from whom amount is received; City; State; Zip Code					
		Conroe, TX 77385					
			olitio	cal c	ontr	ibution returned to filer	
		Membership					
	Date	Name of person from whom amount is received				Amount (\$)	
	01/17/2025	Meeks, Robyn					\$40.00
		Address of person from whom amount is received; City; State; Zip Code					
		New Caney, TX 77357					
			olitio	cal c	ontr	ibution returned to filer	
		Membership					

	The Instru	ction Guide explains how to complete this form.	1	L	Total p	ages Schedule K:	
	THE IIISHU	ction dutice explains now to complete this form.			Sch: 8	/12 Rpt: 22/26	
2	FILER NAME		3			(Ethics Commission F	ilers)
L	East Montgo	mery County Republican Women - PAC			00070	644	
4	Date	5 Name of person from whom amount is received				8 Amount (\$)	
	01/16/2025	Melancon, Alice					\$25.00
		6 Address of person from whom amount is received; City; State; Zip Code					
		Conroe, TX 77385					
l			Chook if poli	itio	al aantr	ibution returned to filer	
		Membership	Check ii poii	IUC	ai contr	ibution returned to filer	
⊨							
l	Date	Name of person from whom amount is received				Amount (\$)	<b>#05.00</b>
	01/16/2025	Miller, Melisa					\$25.00
		Address of person from whom amount is received; City; State; Zip Code					
		Cleveland, TX 77378					
		<u> </u>	Check if noti	itic	al contr	libution returned to filer	
		Membership	Check ii poii	ilic	ai coriti	ibation retained to lile	
H	Data					Λ (Φ)	
l	Date 05/08/2025	Name of person from whom amount is received				Amount (\$)	217.66
	03/06/2023	Moore, Crystal				Ψ	217.00
		Address of person from whom amount is received; City; State; Zip Code					
		Splendora, TX 77372					
		Purpose for which amount is received	Check if poli	itic	al contr	ibution returned to filer	
		Event Reimbursement					
F	Date	Name of person from whom amount is received				Amount (\$)	
l	04/10/2025	Persinger, Jennifer				, ,	\$25.00
		Address of person from whom amount is received; City; State; Zip Code		••••			
		Conroe, TX 77306					
		_	Check if poli	itic	al contr	ibution returned to filer	
		Membership					
Г	Date	Name of person from whom amount is received				Amount (\$)	
	01/16/2025	Rhodes, Debbie					\$38.80
		Address of person from whom amount is received; City; State; Zip Code	•••••	••••			
		Porter, TX 77365					
		_	Check if poli	itic	al contr	ibution returned to filer	
		Membership					
1							
ĺ							

	The Instru	ction Guide explains how to complete this form.	1		pages Schedule K: 9/12 Rpt: 23/26	
2	FILER NAME		3	Filer II	C (Ethics Commission F	ilers)
	East Montgo	omery County Republican Women - PAC		00070		,
4	Date	5 Name of person from whom amount is received			8 Amount (\$)	
	02/14/2025	Rhodes, Debbie				\$10.00
		6 Address of person from whom amount is received; City; State; Zip Code			1	
		Porter, TX 77365				
		7 Purpose for which amount is received	olitic	al cont	ribution returned to filer	
		Donation				
	Date	Name of person from whom amount is received			Amount (\$)	
	05/13/2025	Rollins, Jimmy				\$25.00
		Address of person from whom amount is received; City; State; Zip Code			•	
		Dayton, TX 77535				
		Purpose for which amount is received	olitic	cal cont	ribution returned to filer	
		Membership				
	Date	Name of person from whom amount is received			Amount (\$)	
	05/13/2025	Rollins, Susan				\$40.00
		Address of person from whom amount is received; City; State; Zip Code	•••••		1	
		Dayton, TX 77535				
			olitic	cal cont	ribution returned to filer	
		Membership				
	Date	Name of person from whom amount is received			Amount (\$)	
	01/16/2025	Schmidt, Elayna Rose				\$10.00
		Address of person from whom amount is received; City; State; Zip Code			Ϊ	
		Splendora, TX 77372				
		_ ·	olitio	cal cont	ribution returned to filer	
		Membership			-	
	Date	Name of person from whom amount is received			Amount (\$)	
	01/16/2025	Schmidt, Melissa				\$40.00
		Address of person from whom amount is received; City; State; Zip Code			]	
		0.11				
		Splendora, TX 77372				
		<u> </u>	olitic	cal cont	ribution returned to filer	
		Membership				

	The Instru	cti	on Guide explains how to complete this form.	1		ages Schedule K: L0/12 Rpt: 24/26		
2	FILER NAME			3		-	-ilers)	
			ery County Republican Women - PAC		00070	`	,	
4	Date	5	Name of person from whom amount is received			8 Amount (\$)		
	01/16/2025		Schmidt, Travis			γ (ψ)	\$25.00	
	01/10/1010	ļ	Address of person from whom amount is received; City; State; Zip Code				720.00	
		ľ	Address of person from whom amount is received, City, State, 2:p Code					
			Splendora, TX 77372					
		7	Purpose for which amount is received	k if politic	cal cont	ribution returned to filer		
			Membership					
_	Date	$\frac{\bot}{\Box}$	Name of person from whom amount is received			Amount (\$)		
	03/31/2025		Stinnett, Cyndie			Amount (\$)	\$38.99	
	03/31/2023	ļ	-				Ψ30.33	
			Address of person from whom amount is received; City; State; Zip Code					
			Porter, TX 77365					
		$\vdash$		c if nolition	cal cont	I ribution returned to filer		
			Membership	t ii politii	our com	insulion returned to mer		
	Data	<u> </u>				Amazunt (ft)		
	Date 02/14/2025		Name of person from whom amount is received Streeter, Bambi			Amount (\$)	\$30.00	
	02/14/2025	ļ					Φ30.00	
			Address of person from whom amount is received; City; State; Zip Code					
			Porter, TX 77365					
		$\vdash$		k if politic	cal cont	I ribution returned to filer		
			Donation					
-	Date	$\frac{\bot}{\Gamma}$	Name of person from whom amount is received			Amount (\$)		
	03/31/2025		Streeter. Bambi			Αποαπ (Φ)	\$38.99	
	00/01/2020	ļ	Address of person from whom amount is received; City; State; Zip Code				Ψ30.33	
			Address of person from whom amount is received, City, State, Zip Code					
			Porter, TX 77365					
		$\vdash$		k if politic	cal cont	I ribution returned to filer		
_	Date	╁	Name of person from whom amount is received			Amount (\$)		
	02/14/2025		Teal, Alana			Αποαπ (Φ)	\$10.00	
	02/1 1/2020	ļ					Ψ10.00	
			Address of person from whom amount is received; City; State; Zip Code					
			Conroe, TX 77302					
		$\vdash$		k if politic	cal cont	I ribution returned to filer		
			Membership	v ii poiitii	our com	insulative to mer		

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	The Instru	ction Guide explains how to complete this form.	1	Tota	al pa	ages Schedule K:	
	THE MISTRA	otion datae explains now to complete this form.		Scł	า: 13	1/12 Rpt: 25/26	
2	FILER NAME		3			(Ethics Commission I	-ilers)
	East Montgo	omery County Republican Women - PAC		000	706	544	
4	Date	5 Name of person from whom amount is received				8 Amount (\$)	
	02/28/2025	Valdez, Scharlene			]		\$24.34
		6 Address of person from whom amount is received; City; State; Zip Code					
		Copros TV 77201					
		Conroe, TX 77301	L				
		7 Purpose for which amount is received CI Membership	neck if politi	cai c	ontri	bution returned to filer	
┕		· ·					
	Date	Name of person from whom amount is received				Amount (\$)	
	04/08/2025	Vickery, Anne					\$40.00
		Address of person from whom amount is received; City; State; Zip Code					
		New Caney, TX 77357					
		<u> </u>	baali if maliti			la stice waterway of to file.	
		Donnation	песк ії роііц	cai c	OHUH	bution returned to filer	
L							
	Date	Name of person from whom amount is received				Amount (\$)	<b>#22.00</b>
	01/16/2025	White, Karen					\$23.00
		Address of person from whom amount is received; City; State; Zip Code					
		Porter, TX 77365					
			heck if politi	cal c	ontri	bution returned to filer	
		Donation					
F	Date	Name of person from whom amount is received			T	Amount (\$)	
	02/13/2025	Williams, Gene				Amount (4)	\$25.00
	02/10/2020	Address of person from whom amount is received; City; State; Zip Code					Ψ20.00
		Address of person from whom amount is received, City, State, 21p Code					
		Crosby, TX 77352					
		Purpose for which amount is received	heck if politi	cal c	ontri	bution returned to filer	
		Membership					
F	Date	Name of person from whom amount is received			T	Amount (\$)	
	01/16/2025	Williams, Krystal				runount (4)	\$40.00
		Address of person from whom amount is received; City; State; Zip Code					
		/ duries of person from whom amount is received, easy, state, 21p essay					
		Conroe, TX 77301					
		Purpose for which amount is received	heck if politi	cal c	ontri	bution returned to filer	
		Membership	-				
Г		1					

	The Instru	ction Guide explains how to complete this form.	1			ages Schedule K: .2/12 Rpt: 26/26	
2	FILER NAME		3		Filer ID	(Ethics Commission Fi	lers)
	East Montgo	mery County Republican Women - PAC			00070	0644	
4	Date	5 Name of person from whom amount is received	L_			8 Amount (\$)	
	02/13/2025	Williams, Mary Jane					\$40.00
		6 Address of person from whom amount is received; City; State; Zip Cod	e				
		,					
		Conroe, TX 77301					
		7 Purpose for which amount is received	Check if polit	tica	al cont	ribution returned to filer	
		Membership					
=	Date	Name of person from whom amount is received				Amount (\$)	
	01/16/2025	Williams, Timothy				` ′	\$25.00
	01/10/2020	-					20.00
		Address of person from whom amount is received; City; State; Zip Cod	le				
		Conroe, TX 77302					
		Purpose for which amount is received	Check if nolit	tic	al cont	Iribution returned to filer	
		Membership	Oncok ii poiit	LIC	ai com	indution retained to mer	
						T	
	Date	Name of person from whom amount is received				Amount (\$)	00
	03/31/2025	Wreaths Across America				Φ2	265.00
		Address of person from whom amount is received; City; State; Zip Cod	е				
		Columbia Falls, ME 04623					
		Purpose for which amount is received	Chook if polit	tio	al cont	ribution returned to filer	
		Fundraiser	Check ii polit	liCi	ai cont	ribution returned to filer	
						T	
	Date	Name of person from whom amount is received				Amount (\$)	
	05/16/2025	Wreaths Across America					\$10.00
		Address of person from whom amount is received; City; State; Zip Cod	e				
		Onlywebin Falls MF 04000					
		Columbia Falls, ME 04623					
		Purpose for which amount is received	Check if polit	tica	al cont	ribution returned to filer	
		Fundraising					
	Date	Name of person from whom amount is received				Amount (\$)	
	05/13/2025	Zepeda, Gloria				\$	\$20.00
		Address of person from whom amount is received; City; State; Zip Cod	e			1	
		New Caney, TX 77357					
		Purpose for which amount is received	Check if polit	tic	al cont	ribution returned to filer	
L		Donation					