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) 00015561 3 COMMITTEE NAME **OFFICE USE ONLY** Fort Bend Republican Women's Club PAC Date Received **ELECTRONICALLY FILED** 07/15/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 7407 Rain Drop Ct Date Hand-delivered or Date Postmarked Change of Address Richmond, TX 77407 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Lois NAME NICKNAME LAST **SUFFIX** Gremminger STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 7407 Rain Drop Ct STREET **ADDRESS** (Residence or Business) Richmond, TX 77407 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1910 Fawn Way Ct MAILING **ADDRESS** Richmond, TX 77406 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 924-9085 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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
	n Women's Club PAC		00015561	,
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.)			
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	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	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	8,072.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	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
6 AFFIDAVIT	<u> </u>			
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
			emminger	
		Signature of Car	mpaign Treasi	irer
AFFIX NOTAI	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ed before me, by the said	, tr	nis the	day
		which, witness my hand and seal of office.		
		2011		
Signature of officer	administering oath	Printed name of officer administering oath	litle of offic	cer administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

					3 of 17
17 CO	MMITTE	EE NAME	18 Filer ID	(Ethics Commis	sion Filers)
For	t Bend	Republican Women's Club PAC	00015561	•	,
19 SC	HEDULI	E SUBTOTALS		T	
l		SCHEDULE		SUBTOTA	L AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	5,317.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	2,755.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR 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.	Х	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	15,154.66
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONEI	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 1/3 Rpt: 4/17	
2	2 FILER NAME		3	Filer ID (Ethics Commission	n Filers)		
		epublican Women's Club PA(L	00015561	
4	Date 04/12/2025 5 Full name of contributor out-of-state PAC (ID#:) Bennett, Traci 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$304.00		
		Missouri City, TX 77459					
8	Principal occu Retired	pation / Job title (See Instruction	s)	9 Employer (See Instructions None	5)		
	Date 05/28/2025				Amount of Contribution (\$)	\$220.00	
		Sugar Land, TX 77479	, ,		Ĺ		
	Principal occu Retired	pation / Job title (See Instruction:	5)	Employer (See Instructions	S) 		
	Date 05/28/2025				Amount of Contribution (\$)	\$123.00	
		Sugar Land, TX 77479					
	Principal occu Retired	pation / Job title (See Instruction:	5)	Employer (See Instructions	5)		
	Date 04/05/2025	Full name of contributor Gremminger, Lois (Ms.) Contributor address; City; S Richmond, TX 77406	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$300.00
	Principal occu Retired	pation / Job title (See Instruction	5)	Employer (See Instructions none	<u>1</u> 6)		
	Date 04/23/2025	Full name of contributor Icenhower, Kim (Mrs.) Contributor address; City; S Sugar Land, TX 77479	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$300.00
	Principal occu consultant	pation / Job title (See Instruction:	5)	Employer (See Instructions self-employed	<u>l</u> S)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDU	LE A1		
	The Instruc	ction Guide explains hov	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/3 Rpt: 5/17	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Fort Bend Re	epublican Women's Club PA(00015561	
4	Date 05/28/2025	5 Full name of contributor Jameson, Cindy	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$460.00
		6 Contributor address; City; State; Zip Code					
_	Dringing con	Sugar Land, TX 77498	2)	6 Employer (Co.) Instructions	<u>, </u>		
0	Retired	pation / Job title (See Instruction	o) 	9 Employer (See Instructions	•)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	05/27/2025	McCutcheon, Carol					\$300.00
		Contributor address; City; S	tate; Zip Code				
		Sugar Land, TX 77479					
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	s)		
	Housewife			n/a			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	04/22/2025 Morales, Vincent (Mr.)					\$1,005.00	
		Contributor address; City; S Rosenberg, TX 77471	tate; Zip Code				
	Principal occu	pation / Job title (See Instruction	 5)	Employer (See Instructions	<u> </u>		
	Commission	·	•	Fort Bend County	•		
	Date	Full name of contributor	out-of-state PAC (ID#:_	,	Π	Amount of Contribution (\$)	
	05/12/2025	Robideau, Holly	out or state 1710 (1511.			, and an extra contains about (4)	\$300.00
		Contributor address; City; S	tate; Zip Code				*******
		Sugar Land, TX 77478					
	Principal occu Accountant	pation / Job title (See Instruction	5)	Employer (See Instructions Self-Employed	s)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/04/2025	William, Ferguson (Mr.)					\$1,005.00
		Contributor address; City; S Sugar Land, TX 77479	tate; Zip Code				
	Principal occu	pation / Job title (See Instruction:	<u> </u>	Employer (See Instructions	<u>L</u> ;)		
	Retired	paration and (accompanies)	-,		,		

MONE	TARY POLITICAL CONTRIBUTION	NC	IS		SCHEDULE A1
The Insti	uction Guide explains how to complete this	forr	n.	1	Total pages Schedule A1: Sch: 3/3 Rpt: 6/17
2 FILER NAM Fort Bend	E Republican Women's Club PAC			3	Filer ID (Ethics Commission Filers) 00015561
4 Date 04/22/202	5 Full name of contributor out-of-state PAC (ID#: Wong, Daniel (Mr.) 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$) \$1,000.00
O Dringing of	Missouri City, TX 77459	۱۵	Employer (Coo Instructions	<u></u>	
Principal od President	cupation / Job title (See Instructions) & CEO	9	Employer (See Instructions Tolunay-Wong Enginee		Inc.,

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 1/2 Rpt: 7/17		
2 FILER NAME Fort Bend R	republican Women's Club PAC		3 Filer ID (Ethics Commission Filers) 00015561		
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
5 Date 05/28/2025	 Full name of contributor out-of-state PAC (ID#:		8 Amount of contribution (\$) In-kind contribution (\$) description \$150.00 Silent Auction donation of Garden Party for (12).		
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. -JUDICIAL) (See instructions)		
Retired		None			
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
10 ii contributor	is a clinia, law little of parchi(s) (if any) (if of tooble in E)				
Date 05/28/2025	Full name of contributor out-of-state PAC (ID#: Horgan, Maggy Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$500.00 Silent Auction donation of (5) \$100 gift certificates to Houston Diamond & Beauty		
	Sugar Land, TX 77479		Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON			
Business O	wner	self-employed			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 05/28/2025	Full name of contributor out-of-state PAC (ID#: McCarty, Alexis Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$600.00 Silent Auction item: 3 night stay in Canyon Lake		
	Richmond, TX 77407		Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer Realtor Self-em			-JUDICIAL) (See instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
If contributor	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The lineston	estion Cuide combine bounts commiste this f		1 Total pages Schedule A2:		
The Instruction Guide explains how to complete this form.			Sch: 2/2 Rpt: 8/17		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Fort Bend F	Republican Women's Club PAC		00015561		
4					
TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution contribution (\$) description		
05/28/2025	Owen, Kami (Dr.)		\$505.00 Silent Auction donation:		
	7 Contributor address; City; State; Zip Code		gift certificates for 60 min		
			tuning fork, 90 min sound		
	0		i bowl,90 min massage		
	Sugar Land, TX 77479	T	Check if travel outside of Texas. Complete Schedule T.		
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)		
Business O		self-employed			
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
24 001111001010	omployernan iiiii (i eri debien iz)	20 Eaw IIIII of containate	in a spease (ii airy) (i are de bre ii iz)		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
10 ii continuator	is a dring, law inition parent(s) (ii arry) (i or tooblowle)				
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description		
05/28/2025	Rhodes, Delilah		\$1,000.001 Silent Auction donation of		
	Contributor address; City; State; Zip Code		(2) fully immersive		
			children's fairytale photo		
			ı session		
	Houston, TX 77056		Check if travel outside of Texas. Complete Schedule T.		
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	·		
Business O	-	Fairytale Photogra	phy		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Comm	nission Filers)
Sch: 1/9 Rpt: 9/17	Fort Bend Republican Women's Club PAC	00015561	
4 Date	5 Payee name		
01/02/2025	Club Express		
6 Amount (\$)	7 Payee Address; City; State; Zip		
42.58	1051 Perimeter Dr #350		
Expenditure from corporate funds	Schaumburg, IL 60173		
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories)	•	ation required.)
OF EXPENDITURE	Fees	Monthly software fee	
Date	Payee name		
02/03/2025	Club Express		
Amount (\$)	Payee Address; City; State; Zip		
42.00	1051 Perimeter Dr #350		
Expenditure from			
corporate funds	Schaumburg, IL 60173		
PURPOSE	I * * * * * * * * * * * * * * * * * * *	(b) Description (See instructions regarding type of inform	ation required.)
OF EXPENDITURE	Fees	Monthly software fee	
Date	Payee name		
03/03/2025	Club Express		
Amount (\$)	Payee Address; City; State; Zip		
42.96	1051 Perimeter Dr #350		
Expenditure from			
corporate funds	Schaumburg, IL 60173		
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of inform	ation required.)
OF EXPENDITURE	Fees	Monthly software fee	
Date	Payee name		
04/01/2025	Club Express		
Amount (\$)	Payee Address; City; State; Zip		
44.12	1051 Perimeter Dr #350		
Expenditure from			
corporate funds	Schaumburg, IL 60173		
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	•	ation required.)
OF EXPENDITURE	Fees	Monthly software fee	
	<u> </u>		

	The Instruction Guide explains how to complete this form.
1 Total pages Schedule I: Sch: 2/9 Rpt:	2 FILER NAME Fort Bend Republican Women's Club PAC 3 Filer ID (Ethics Commission Filers) 00015561
4 Date 05/01/2025	5 Payee name Club Express
6 Amount (\$) 44.14	7 Payee Address; City; State; Zip 1051 Perimeter Dr #350
Expenditure from corporate funds	Schaumburg, IL 60173
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required.) Monthly software fee
Date 06/02/2025	Payee name Club Express
Amount (\$) 44.24 Expenditure from corporate funds	Payee Address; City; State; Zip 1051 Perimeter Dr #350 Schaumburg, IL 60173
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required.) Monthly software fee
Date	Payee name
06/02/2025	Dees, Mackenzie Payee Address; City; State; Zip
Amount (\$) 625.00	Payee Address; City; State; Zip 14526 Joyce St
Expenditure from corporate funds	Needville, TX 77461
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Scholarship College scholarship award Partial payment
Date 06/03/2025	Payee name Dees Mackenzie
06/03/2025 Amount (\$)	Dees, Mackenzie Payee Address; City; State; Zip
625.00	14526 Joyce St
Expenditure from corporate funds	Needville, TX 77461
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Scholarship College scholarship award Partial payment (2nd & final)

	The Instruction Guide explains how to complete this form.				
1 Total pages Schedule I: Sch: 3/9 Rpt:	2 FILER NAME Fort Bend Republican Women's Club PAC 3 Filer ID (Ethics Commission Filers) 00015561				
4 Date 03/13/2025	5 Payee name FBCGOP				
6 Amount (\$) 2,500.00 Expenditure from corporate funds	7 Payee Address; City; State; Zip P. O. Box 461 Sugar Land, TX 77487				
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Table purchase (b) Description (See instructions regarding type of information required.) Lincoln Reagan Dinner table purchase				
Date 01/07/2025	Payee name Greater Houston Council of FRW				
Amount (\$) 30.00 Expenditure from corporate funds	Payee Address; City; State; Zip 7941 Katy Freeway #272 Houston, TX 77024				
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required.) Membership fee				
Date 06/04/2025	Payee name Icenhower, Kim				
Amount (\$)	Payee Address; City; State; Zip				
34.64 Expenditure from corporate funds	3019 Arrowhead Dr Sugar Land, TX 77479				
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.) reimbursement for Woman of the Year award				
Date 06/02/2025	Payee name Kovar, Lillian (Miss)				
Amount (\$)	Payee Address; City; State; Zip				
250.00 Expenditure from corporate funds	2222 Crescent Water Rosenberg, TX 77471				
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Scholarship (b) Description (See instructions regarding type of information required.) College scholarship award recipient (1st of 2 payments)				

	The Instruction Guide explains how to complete this form.		
Total pages Schedule I: Sch: 4/9 Rpt:	2 FILER NAME Fort Bend Republican Women's Club PAC 3 Filer ID (Ethics Commission Filers) 00015561		
4 Date 06/03/2025	5 Payee name Kovar, Lillian (Miss)		
6 Amount (\$) 1,000.00	7 Payee Address; City; State; Zip 2222 Crescent Water		
Expenditure from corporate funds	Rosenberg, TX 77471		
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Scholarship College scholarship award Partial payment (2nd & final)		
Date 03/26/2025	Payee name Lojo Brothers Kwik Kopy		
Amount (\$) 30.00 Expenditure from corporate funds	Payee Address; City; State; Zip 100 Industrial Blvd Suite 160 Sugar Land, TX 77478		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Printing Expense (b) Description (See instructions regarding type of information required.) name tags		
Date 04/04/2025	Payee name Lojo Brothers Kwik Kopy		
Amount (\$) 60.00 Expenditure from corporate funds	Payee Address; City; State; Zip 100 Industrial Blvd Suite 160 Sugar Land, TX 77478		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Printing Expense (b) Description name tags		
Date 05/28/2025	Payee name Lojo Brothers Kwik Kopy		
Amount (\$) 25.00 Expenditure from corporate funds	Payee Address; City; State; Zip 100 Industrial Blvd Suite 160 Sugar Land, TX 77478		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Printing Expense (b) Description (See instructions regarding type of information required.) Program for May Scholarship event		

	The Instruction Guide explains how to complete this form.
Total pages Schedule I: Sch: 5/9 Rpt:	2 FILER NAME Fort Bend Republican Women's Club PAC 3 Filer ID (Ethics Commission Filers) 00015561
4 Date	5 Payee name
01/28/2025	Los Gallitos
6 Amount (\$)	7 Payee Address; City; State; Zip
723.00	3385 Hwy 6
Expenditure from corporate funds	SugarLand, TX 77478
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense (b) Description (See instructions regarding type of information required.) Monthly membership meeting luncheon
Date	Payee name
02/28/2025	Los Gallitos
Amount (\$)	Payee Address; City; State; Zip
819.59	3385 Hwy 6
Expenditure from	
corporate funds	SugarLand, TX 77478
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense (b) Description (See instructions regarding type of information required.) monthly membership luncheon meeting
Date	Payee name
03/28/2025	Los Gallitos
Amount (\$)	Payee Address; City; State; Zip
726.90	3385 Hwy 6
Expenditure from corporate funds	SugarLand, TX 77478
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.) Event Expense Monthly membership luncheon meeting
Date	Payee name
04/25/2025	Los Gallitos
Amount (\$)	Payee Address; City; State; Zip
788.75	3385 Hwy 6
Expenditure from corporate funds	SugarLand, TX 77478
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Event Expense Monthly membership lunch meeting

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 6/9 Rpt:	Fort Bend Republican Women's Club PAC	00015561			
4 Date	5 Payee name	•			
05/20/2025	Prosperity Bank				
6 Amount (\$)	7 Payee Address; City; State; Zip				
40.00	80 Sugar Creek Center Blvd				
Expenditure from					
corporate funds	Sugar Land, TX 77478				
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.)			
OF EXPENDITURE	Accounting/Banking	Replacement debit card rush fee			
Date	Payee name				
04/14/2025	Quicken				
Amount (\$)	Payee Address; City; State; Zip				
100.67	3760 Haven Avenue				
Expenditure from	M. J. B. J. GA 64605				
corporate funds	Menlo Park, CA 94025	T			
PURPOSE OF		(b) Description (See instructions regarding type of information required.)			
EXPENDITURE	Accounting/Banking	annual subscription			
Date	Payee name				
06/26/2025	Stryk, Debra				
Amount (\$)	Payee Address; City; State; Zip				
134.29	1005 Foster Dr.				
Expenditure from					
corporate funds	Richmond, TX 77469				
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.)			
OF EXPENDITURE	Event Expense	Reimbursement for silent auction donation for Reagan Lincoln Dinner (FBGOP)			
		Reagan Lincoln Dinner (FBGOF)			
Date	Payee name				
01/21/2025	Sugar Creek Country Club				
Amount (\$)	Payee Address; City; State; Zip				
500.00	420 Sugar Creek Blvd				
Expenditure from	Current and TV 77470				
corporate funds	Sugar Land, TX 77478	Tax			
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Event Expense	· ·			
EXPENDITURE	Event Expense	Downpayment for May Event			

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule I:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)	
Sch: 7/9 Rpt:	Fort Bend Republican Women's Club PAC		00015561		
4 Date	5 Payee name		•		
06/05/2025	Sugar Creek Country Club				
6 Amount (\$)	7 Payee Address; City; State; Zip				
4,661.78	420 Sugar Creek Blvd				
Expenditure from					
corporate funds	Sugar Land, TX 77478				
8 PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)	1		ding type of information required.)	
EXPENDITURE	Event Expense	May Event/Sc	cholarship final	payment	
Date	Payee name				
01/14/2025	TFRW				
Amount (\$)	Payee Address; City; State; Zip				
25.00	13740 US 183 hwy j4				
Expenditure from					
corporate funds	Austin, TX 78750				
PURPOSE		(, 2 cccp	(See instructions regard	ding type of information required.)	
OF EXPENDITURE	Food/Beverage Expense	Snacks			
Date	Dayee name				
01/28/2025	Payee name TFRW				
Amount (\$)	Payee Address; City; State; Zip				
	13740 US 183 hwy j4				
620.00	13740 03 103 flwy j4				
Expenditure from corporate funds	Austin, TX 78750				
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	(b) Description	(See instructions regard	ding type of information required.)	
OF EXPENDITURE	Fees	members NFF	RW dues		
EXPENDITORE					
Date	Payee name				
01/28/2025	TFRW				
Amount (\$)	Payee Address; City; State; Zip				
155.00	13740 US 183 hwy j4				
Expenditure from corporate funds	Austin, TX 78750				
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	(b) Description ((See instructions regard	ding type of information required.)	
OF EXPENDITURE	Membership fee	· ·	ers fee for year	(31 people)	
EXPENDITORE					

The Instruction Guide explains how to complete this form.				
Total pages Schedule I: Sch: 8/9 Rpt:	FILER NAME Fort Bend Republican Women's Club PAC	3 Filer ID (Ethics Commission Filers) 00015561		
4 Date	5 Payee name	00015501		
01/28/2025	TFRW			
6 Amount (\$)	7 Payee Address; City; State; Zip			
20.00	13740 US 183 hwy j4			
Expenditure from corporate funds	Austin, TX 78750			
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.)		
OF EXPENDITURE	Fees	Annual service fee		
Date	Payee name			
03/03/2025	TFRW			
Amount (\$)	Payee Address; City; State; Zip			
60.00	13740 US 183 hwy j4			
Expenditure from	A TV 70750			
corporate funds	Austin, TX 78750	103-		
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Dues	(b) Description (See instructions regarding type of information required.) members dues to NFRW		
EXPENDITURE	Dues	members dues to NFRW		
Date	Payee name			
03/03/2025	TFRW			
Amount (\$)	Payee Address; City; State; Zip			
15.00	13740 US 183 hwy j4			
Expenditure from				
corporate funds	Austin, TX 78750			
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Dues	(b) Description (See instructions regarding type of information required.)		
EXPENDITURE	Dues	Member dues to TFRW		
Date	Payee name			
04/22/2025	TFRW			
Amount (\$)	Payee Address; City; State; Zip			
140.00	13740 US 183 hwy j4			
Expenditure from				
corporate funds	Austin, TX 78750			
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Dues	•		
EXPENDITURE	Dues	Member dues to NFRW		
		1		

	The Instruction Guide explains how to	complete this form.	
	The instruction during explains now to		
1 Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 9/9 Rpt:	Fort Bend Republican Women's Club PAC	00015561	
4 Date	5 Payee name		
04/22/2025	TFRW		
6 Amount (\$)	7 Payee Address; City; State; Zip		
35.00	13740 US 183 hwy j4		
Expenditure from			
corporate funds	Austin, TX 78750		
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories)	· ·	
OF EXPENDITURE	Dues	member dues to TFRW	
	1		
Date	Payee name		
01/31/2025	TFRW		
Amount (\$)	Payee Address; City; State; Zip		
120.00	13740 US 183 Hwy j4		
Expenditure from	Austin TV 707F0		
corporate funds	Austin, TX 78750	In.	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Member dues	(See instructions regarding type of information required.) NFRW portion of member dues (6 people)	
EXPENDITURE	Welliber dues	NPRW portion of member dues (o people)	
Date	Payee name		
01/31/2025	TFRW		
Amount (\$)	Payee Address; City; State; Zip		
30.00	13740 US 183 hwy j4		
Expenditure from			
corporate funds	Austin, TX 78750		
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.)	
OF EXPENDITURE	Member dues	TFRW portion of member annual dues (6 people)	
and Enteriorite			