



# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Fayette County Republican Women	<b>13 Filer ID</b> (Ethics Commission Filers) 00054176
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,987.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 5,709.14
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 10,941.94
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**16 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Patricia Diane Petras  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - GPAC

<b>17 COMMITTEE NAME</b> Fayette County Republican Women		<b>18 Filer ID</b> (Ethics Commission Filers) 00054176
<b>19 SCHEDULE SUBTOTALS</b>		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,987.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 5,709.14
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 43.56

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/38 Rpt: 4/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 02/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) AYERS, TOM	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  LA GRANGE, TX 78945		
<b>8</b> Principal occupation / Job title (See Instructions) RETIRED		<b>9</b> Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) AYERS, TOM	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  LA GRANGE, TX 78945		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) AYERS, TOM	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  LA GRANGE, TX 78945		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Appelt, Barbara (Mrs.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Appelt, Barbara (Mrs.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/38 Rpt: 5/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 05/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appelt, Barbara (Mrs.)	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atwood, Carmela (Mrs.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Fayetteville, TX 78940-5247		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atwood, Carmela (Mrs.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Fayetteville, TX 78940-5247		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atwood, Carmela (Mrs.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Fayetteville, TX 78940-5247		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atwood, Carmela (Mrs.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Fayetteville, TX 78940-5247		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/38 Rpt: 6/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 02/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Atwood, Dan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fayetteville, FL 78940	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Atwood, Dan <hr/> Contributor address; City; State; Zip Code  Fayetteville, FL 78940	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baker, John T (Mrs.) <hr/> Contributor address; City; State; Zip Code  Fayetteville, TX 78940	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benbenek, Pam <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benbenek, Pam <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/38 Rpt: 7/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 05/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bernsen, William (Mr.)	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  Plum, TX 78945		
<b>8</b> Principal occupation / Job title (See Instructions) Surveyor		<b>9</b> Employer (See Instructions) Self
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bernsen, William (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Plum, TX 78945		
Principal occupation / Job title (See Instructions) Surveyor		Employer (See Instructions) Self
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Birkelbach, Shannon	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Waller, TX 77484		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Five Horses LLC
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Borne, Phil	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Fayetteville, TX 78940		
Principal occupation / Job title (See Instructions) Rexel		Employer (See Instructions) Product Specialist
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Borne, Sandra	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Fayetteville, TX 78940		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Arts for Rural Texas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/38 Rpt: 8/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 02/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bowman, Steve <hr/> <b>6</b> Contributor address; City; State; Zip Code  Flatonia, TX 78941	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Pastor		<b>9</b> Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Breads, Joe <hr/> Contributor address; City; State; Zip Code  Flatonia, TX 78941	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bridges, Patricia <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bridges, Patricia <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Briggs, Gina <hr/> Contributor address; City; State; Zip Code  Cat Spring, TX 78933	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/38 Rpt: 9/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 01/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brumback, Ellen <hr/> <b>6</b> Contributor address; City; State; Zip Code  La Grange, TX 78945	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brumback, Ellen <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brumback, Ellen <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burns, Billie (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burns, Billie (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/38 Rpt: 10/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 01/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chorens, Cathy <hr/> <b>6</b> Contributor address; City; State; Zip Code  La Grange, TX 78945	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chorens, Cathy <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chorens, Cathy <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chorens, Cathy <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chorens, Cathy <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 8/38 Rpt: 11/53
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 03/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conard, Heidi	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code  La Grange, TX 78945	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennis, Lisa (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  Schulenburg, TX 78956	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennis, Lisa (Mrs.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Schulenburg, TX 78956	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennis, Quinn	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Schulenburg, TX 78956	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dippel, Darryl (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/38 Rpt: 12/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 03/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Downey, Wren <hr/> <b>6</b> Contributor address; City; State; Zip Code  La Grange, TX 78945	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Downey, Wren <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Downey, Wren <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eguizabal, Debra (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eguizabal, Debra (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/38 Rpt: 13/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 04/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eppers, Dawn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Bryan, TX 77803	<b>7</b> Amount of Contribution (\$)  \$60.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fietsam, Brenda (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) County Clerk		Employer (See Instructions) Fayette County
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fleig, Stacy <hr/> Contributor address; City; State; Zip Code  Columbus, TX 78934	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fleig, Stacy <hr/> Contributor address; City; State; Zip Code  Columbus, TX 78934	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Forestier, Frank (Mr.) <hr/> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/38 Rpt: 14/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 04/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Forestier, Frank (Mr.)	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frank, Deborah (Mrs.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frank, Deborah (Mrs.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frank, Deborah (Mrs.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frank, Deborah (Mrs.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/38 Rpt: 15/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 01/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Geesaman, Dennis (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Flatonia, TX 78941	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Geesaman, Dennis (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Flatonia, TX 78941	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Geesaman, Dennis (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Flatonia, TX 78941	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Geesaman, Dennis (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Flatonia, TX 78941	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Geesaman, Kathryn (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Flatonia, TX 78941	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/38 Rpt: 16/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 02/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Geesaman, Kathryn (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Flatonia, TX 78941	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Geesaman, Kathryn (Mrs.) <hr/> Contributor address; City; State; Zip Code  Flatonia, TX 78941	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Geesaman, Kathryn (Mrs.) <hr/> Contributor address; City; State; Zip Code  Flatonia, TX 78941	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hausmann, Debbie <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hausmann, Debbie (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Receptionist		Employer (See Instructions) Sacred Heart Catholic Church



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/38 Rpt: 17/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 02/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Havran, Jean <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fayetteville, TX 78940	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Head, Jacquelyn (Ms.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Head, Jacquelyn (Ms.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Head, Jacquelyn (Ms.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hefner, Terri <hr/> Contributor address; City; State; Zip Code  Flatonia, TX 78941	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/38 Rpt: 18/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 03/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hefner, Terri <hr/> <b>6</b> Contributor address; City; State; Zip Code  Flatonia, TX 78941	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hefner, Terri <hr/> Contributor address; City; State; Zip Code  Flatonia, TX 78941	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Herbrich, James <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) District Atty		Employer (See Instructions) Fayette County
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Higgs, LeMae (Mrs.) <hr/> Contributor address; City; State; Zip Code  Schulenberg, TX 78606	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Minister		Employer (See Instructions) Self Employed
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Higgs, LeMae (Mrs.) <hr/> Contributor address; City; State; Zip Code  Schulenberg, TX 78606	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Minister		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/38 Rpt: 19/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 01/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holub, Kelly (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  La Grange, TX 78945	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) HIM Coder		<b>9</b> Employer (See Instructions) Baylor Scott & White
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hooper, Sandra <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hooper, Sandra <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hooper, Sandra <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hooper, Sandra <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/38 Rpt: 20/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 05/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hooper, Sandra <hr/> <b>6</b> Contributor address; City; State; Zip Code  La Grange, TX 78945	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huffines, Don <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225	Amount of Contribution (\$)  \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Husmann, Karen <hr/> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Husmann, Karen <hr/> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Husmann, Karen <hr/> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/38 Rpt: 21/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 05/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jameson, Joe	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  La Grange, TX 78945		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jameson, Joe	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joost, Glenda	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  West Point, TX 78963		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joost, Glenda	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  West Point, TX 78963		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joost, Glenda	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  West Point, TX 78963		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/38 Rpt: 22/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 03/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Keller, Diane <hr/> <b>6</b> Contributor address; City; State; Zip Code  Brenham, TX 77833	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kolbe, Joyce (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laguarta, Julie <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laguarta, Julie <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laguarta, Julie <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/38 Rpt: 23/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 04/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laguarta, Julio	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  La Grange, TX 78945		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lanouette, Amy	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leidy, Kaye	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Cedar Creek, TX 78612		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leidy, Kaye	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Cedar Creek, TX 78612		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lock, Davina	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/38 Rpt: 24/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 04/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lock, Davina <hr/> <b>6</b> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lock, Davina <hr/> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lock, Davina <hr/> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Long, Shirley <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MARROU, SARAH (Ms.) <hr/> Contributor address; City; State; Zip Code  LA GRANGE, TX 78945	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/38 Rpt: 25/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 01/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maschmeyer, DONALD (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  La Grange, TX 78945	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Owner		<b>9</b> Employer (See Instructions) Self
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maschmeyer, DONALD (Mr.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maschmeyer, Marciel (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maschmeyer, Marciel (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maschmeyer, Marciel (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/38 Rpt: 26/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 03/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moreau, Craig (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Round Top, TX 78954	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moreau, Jamie (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Round Top, TX 78954	
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions) Fayette County
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mueller, Theresa	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Muller, Tammy	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Schulenburg, TX 78956	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Musick, Lisa	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Flatonia, TX 78941	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/38 Rpt: 27/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 03/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nichols, Debbie	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  La Grange, TX 78956		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Neal, Jeanne	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Neal, Jeanne	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Neal, Jeanne	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Neal, Jeanne	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/38 Rpt: 28/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 01/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Neal, Scott (Mr.)	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  La Grange, TX 78945		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Neal, Scott (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Neal, Scott (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, Jeff	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, Jeff	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/38 Rpt: 29/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 05/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, Jeff <hr/> <b>6</b> Contributor address; City; State; Zip Code  La Grange, TX 78945	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, Patsy (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, Patsy (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, Patsy (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$4.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, Patsy (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/38 Rpt: 30/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 05/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, Patsy (Mrs.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  La Grange, TX 78945	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petras, Diane (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Plant Controller		Employer (See Instructions) Arkema
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petras, Diane (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Plant Controller		Employer (See Instructions) Arkema
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petras, Diane (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Plant Controller		Employer (See Instructions) Arkema
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petras, Diane (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Plant Controller		Employer (See Instructions) Arkema

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 28/38 Rpt: 31/53
2 FILER NAME Fayette County Republican Women		3 Filer ID (Ethics Commission Filers) 00054176
4 Date 03/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Powers, Brenda	7 Amount of Contribution (\$)  \$20.00
	6 Contributor address; City; State; Zip Code  La Grange, TX 78945	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Powers, Brenda	Amount of Contribution (\$)  \$40.00
	Contributor address; City; State; Zip Code  La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Powers, Brenda	Amount of Contribution (\$)  \$20.00
	Contributor address; City; State; Zip Code  La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodibaugh, Cindy (Mrs.)	Amount of Contribution (\$)  \$20.00
	Contributor address; City; State; Zip Code  Flatonia, TX 78941	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rogers, Deborah	Amount of Contribution (\$)  \$20.00
	Contributor address; City; State; Zip Code  Austin, TX 78703	
Principal occupation / Job title (See Instructions) Site Manager		Employer (See Instructions) LCRA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/38 Rpt: 32/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 03/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Romberg, Frank (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  La Grange, TX 78945	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sacco, Connie (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sacco, Connie (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sacco, Connie (Mrs.) <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schaefer, Jean <hr/> Contributor address; City; State; Zip Code  Schulenberg, TX 78956	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/38 Rpt: 33/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 02/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schaefer, Jean <hr/> <b>6</b> Contributor address; City; State; Zip Code  Schulenberg, TX 78956	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schaefer, Jean <hr/> Contributor address; City; State; Zip Code  Schulenberg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schaefer, Jean <hr/> Contributor address; City; State; Zip Code  Schulenberg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schaefer, Jean <hr/> Contributor address; City; State; Zip Code  Schulenberg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schneider, Barbara <hr/> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) 

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/38 Rpt: 34/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 06/02/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seffel, Beverly	<b>7</b> Amount of Contribution (\$) \$40.00
<b>6</b> Contributor address; City; State; Zip Code  La Grange, TX 78945		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sellers, Kannahi	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simmons, Alison	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simmons, Alison	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simmons, Alison	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  La Grange, TX 78945		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/38 Rpt: 35/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 04/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simmons, Alison <hr/> <b>6</b> Contributor address; City; State; Zip Code  La Grange, TX 78945	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simmons, Alison <hr/> Contributor address; City; State; Zip Code  La Grange, TX 78945	Amount of Contribution (\$)  \$243.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simpson, Cindy <hr/> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simpson, Cindy <hr/> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simpson, Cindy <hr/> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/38 Rpt: 36/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 04/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simpson, Cindy	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simpson, Cindy	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simpson, James	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simpson, James	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simpson, James	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/38 Rpt: 37/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 02/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Kristina <hr/> <b>6</b> Contributor address; City; State; Zip Code  weimar, TX 78962	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Staha, Robert <hr/> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Staha, Sherri <hr/> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Staha, Sherri <hr/> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Terronez, Daniel <hr/> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/38 Rpt: 38/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 01/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Terronez, Sherrie	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Terronez, Sherrie	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Terronez, Sherrie	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Terronez, Sherrie	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Terronez, Sherrie	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Schulenburg, TX 78956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/38 Rpt: 39/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 05/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Terronez, Sherrie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Schulenburg, TX 78956	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wallace, Bonnie <hr/> Contributor address; City; State; Zip Code  Llano, TX 78643	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilks, Len <hr/> Contributor address; City; State; Zip Code  Flatonia, TX 78941	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilks, Teri <hr/> Contributor address; City; State; Zip Code  Flatonia, TX 78941	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wingo, Cindy <hr/> Contributor address; City; State; Zip Code  Schulenberg, TX 78956	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/38 Rpt: 40/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 01/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wingo, Cindy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Schulenberg, TX 78956	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Realtor		<b>9</b> Employer (See Instructions) Self
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wingo, Cindy <hr/> Contributor address; City; State; Zip Code  Schulenberg, TX 78956	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wingo, Cindy <hr/> Contributor address; City; State; Zip Code  Schulenberg, TX 78956	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wingo, Cindy <hr/> Contributor address; City; State; Zip Code  Schulenberg, TX 78956	Amount of Contribution (\$)  \$65.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 01/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Anne (Mrs.) <hr/> Contributor address; City; State; Zip Code  Flatonia, TX 78941	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/38 Rpt: 41/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 01/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wunderlich , Roger (Mr.) ----- <b>6</b> Contributor address; City; State; Zip Code  Fayetteville, TX 78940	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Pct 2 Constable		<b>9</b> Employer (See Instructions) Fayette County
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wunderlich, Sharon (Mrs.) ----- Contributor address; City; State; Zip Code  Fayetteville, TX 78940	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Round Top State Bank

# 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  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/11 Rpt: 42/53	<b>2</b> FILER NAME Fayette County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054176
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<b>4</b> Date 02/19/2025	<b>5</b> Payee name Benbenek, Pam (Mrs.)
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<b>6</b> Amount (\$) \$60.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1319 Knape Rd  La Grange, TX 78945
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Christmas Party \$80 less 2/19/25 luncheon expense \$20.00=\$60
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/17/2025	Payee name Club Express
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Amount (\$) \$1.40  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jean Schaefer membership dues 40.00 paid with credit card. Fees 1.40
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/31/2025	Payee name Club Express
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Amount (\$) \$4.20  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership fees paid by credit card, Lanouette, Higgs, and Moreau \$120 less fees of \$4.20.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/11 Rpt: 43/53	<b>2</b> FILER NAME Fayette County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 01/31/2025	<b>5</b> Payee name Club Express	
<b>6</b> Amount (\$) \$60.13  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly hosting fee 48.30, Logistics services 7.00 and Postage 4.83
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 02/10/2025	Payee name Club Express	
Amount (\$) \$45.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Certificate for FCRWTX.org \$45.00
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 02/28/2025	Payee name Club Express	
Amount (\$) \$0.65  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cindy Wingo purchased wine glasses with credit card \$15.00
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# 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  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/11 Rpt: 44/53	<b>2</b> FILER NAME Fayette County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054176
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<b>4</b> Date 02/28/2025	<b>5</b> Payee name Club Express
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<b>6</b> Amount (\$) \$38.96  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Hosting Fee 36.96 and text messaging phone number \$2.00
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/31/2025	Payee name Club Express
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Amount (\$) \$0.80  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Craig Moreau paid membership with credit card \$20.00
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/18/2025	Payee name Club Express
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Amount (\$) \$2.70  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership fees James/Cindy Sampson \$60.00, Alison Simmons bought wine glasses \$10.00
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/11 Rpt: 45/53	<b>2</b> FILER NAME Fayette County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 03/31/2025	<b>5</b> Payee name Club Express	
<b>6</b> Amount (\$) \$40.22  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly hosting fee \$38.22 and text messaging \$2.00
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/07/2025	Payee name Club Express	
Amount (\$) \$0.81  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text messaging fees for March
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/30/2025	Payee name Club Express	
Amount (\$) \$4.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Literacy Project Fund Alison Simmons \$20, Cathy Chorens \$50.00
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# 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  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/11 Rpt: 46/53	<b>2</b> FILER NAME Fayette County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054176
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<b>4</b> Date 04/30/2025	<b>5</b> Payee name Club Express
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<b>6</b> Amount (\$) \$42.74  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Hosting Fee \$40.74 and Text messaging \$2.00
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/30/2025	Payee name Club Express
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Amount (\$) \$44.84  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly hosting fee \$42.84 and text messaging \$2.00
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/10/2025	Payee name Club Express
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Amount (\$) \$0.87  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 Perimeter Dr Ste 250 Schaumburg, IL 60173
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text Messaging Sent
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/11 Rpt: 47/53	<b>2</b> FILER NAME Fayette County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054176
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<b>4</b> Date 05/21/2025	<b>5</b> Payee name Fayette County Record
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<b>6</b> Amount (\$) \$225.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code P.O. Box 400  La Grange, TX 78945
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertisement for 5/21/25 Meeting
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/08/2025	Payee name Frank, Deborah (Mrs.)
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Amount (\$) \$56.94  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1020 Konetzke Lane  La Grange, TX 78945
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 4th qtr newsletter copies
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/18/2025	Payee name Frank, Deborah (Mrs.)
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Amount (\$) \$73.31  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1020 Konetzke Lane  La Grange, TX 78945
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for notecards
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/11 Rpt: 48/53	<b>2</b> FILER NAME Fayette County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 04/09/2025	<b>5</b> Payee name Frank, Deborah (Mrs.)	
<b>6</b> Amount (\$) \$56.94  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1020 Konetzke Lane  La Grange, TX 78945	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 1st quarter newsletter printing expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/15/2025	Payee name Frisch Auf Valley Country Club	
Amount (\$) \$499.71  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 575 Country Club Drive  La Grange, TX 78945	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense January monthly luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/19/2025	Payee name Frisch Auf Valley Country Club	
Amount (\$) \$559.68  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 575 Country Club Drive  La Grange, TX 78945	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense February monthly luncheon 2/19/25
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# 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  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/11 Rpt: 49/53	<b>2</b> FILER NAME Fayette County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054176
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<b>4</b> Date 03/19/2025	<b>5</b> Payee name Frisch Auf Valley Country Club
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<b>6</b> Amount (\$) \$919.47  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 575 Country Club Drive  La Grange, TX 78945
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense March monthly luncheon
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/16/2025	Payee name Frisch Auf Valley Country Club
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Amount (\$) \$559.58  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 575 Country Club Drive  La Grange, TX 78945
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense April monthly luncheon expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/21/2025	Payee name Frisch Auf Valley Country Club
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Amount (\$) \$779.55  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 575 Country Club Drive  La Grange, TX 78945
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense May monthly luncheon
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/11 Rpt: 50/53	<b>2</b> FILER NAME Fayette County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 01/24/2025	<b>5</b> Payee name Petras, Diane	
<b>6</b> Amount (\$) \$402.95  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 7331 Mueller  La Grange, TX 78945	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Quick Books license 2025
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/19/2025	Payee name Rhodes, Elmer Stewart (Mr.)	
Amount (\$) \$350.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8910 Preston Rd  Frisco, TX 75034	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement for speaker March meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/24/2025	Payee name Rogers, Brett (Mr.)	
Amount (\$) \$60.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4514 Edinburgh Drive  Tyler , TX 75703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for gas to travel and speak at monthly luncheon.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# 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  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/11 Rpt: 51/53	<b>2</b> FILER NAME Fayette County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054176
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<b>4</b> Date 05/15/2025	<b>5</b> Payee name TFRW
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<b>6</b> Amount (\$) \$325.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code P O Box 171146  Austin, TX 78717
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership fees Submission #2
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/07/2025	Payee name TFRW
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Amount (\$) \$25.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O Box 171146  Austin, TX 78717
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Beryl Dowd Leadership Scholarship Fund
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/07/2025	Payee name TFRW
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Amount (\$) \$25.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O Box 171146  Austin, TX 78717
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Hospitality
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/11 Rpt: 52/53	<b>2</b> FILER NAME Fayette County Republican Women	<b>3</b> Filer ID (Ethics Commission Filers) 00054176
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<b>4</b> Date 01/27/2025	<b>5</b> Payee name Texas Values
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<b>6</b> Amount (\$) \$250.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1005 Congress Ave Ste 830 Austin, TX 78701
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation in lieu of speaker expense, November, 2024
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/04/2025	Payee name Wingo, Cindy (Ms.)
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Amount (\$) \$193.19  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 College  Schulenburg, TX 78956
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense April 25th social supplies reimbursement
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 1/1 Rpt: 53/53
<b>2</b> FILER NAME Fayette County Republican Women		<b>3</b> Filer ID (Ethics Commission Filers) 00054176
<b>4</b> Date 01/02/2025	<b>5</b> Name of person from whom amount is received Club Express	<b>8</b> Amount (\$) \$43.56
	<b>6</b> Address of person from whom amount is received; City; State; Zip Code  Schaumburg, IL 60173	
	<b>7</b> Purpose for which amount is received Credit card fees refunded	<input type="checkbox"/> Check if political contribution returned to filer