FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00017105 3 COMMITTEE NAME **OFFICE USE ONLY** Mesquite Republican Women's PAC Date Received **ELECTRONICALLY FILED** 07/12/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P O Box 851464 Date Hand-delivered or Date Postmarked Change of Address Mesquite, TX 75185 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Mary NAME NICKNAME LAST **SUFFIX** Mallett STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 220 Toler Dr. STREET **ADDRESS** (Residence or Business) Mesquite, TX 75149 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 220 Toler Dr. MAILING **ADDRESS** Mesquite, TX 75149 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (972) 333-3970 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2025 06/30/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

L2 COMMITTEE NAME			13 File		(Ethics Commission Filers)
Mesquite Republican V	Vomen's PAC		000)17105	
4 COMMITTEE ACTIVITY	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Масачиса	A. Supported			
	Measures (Describe by date and location	A. Supported			
	of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
5 CONTRIBUTION		POLITICAL CONTRIBUTIONS (C			
TOTALS		OR GUARANTEES OF LOANS, OI ADE ELECTRONICALLY)	R	\$	565.00
		qualifies for the higher itemization thresh	hold		
	2. TOTAL POLITICA			\$	565.00
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEE:	S OF LOANS)		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	1,897.87
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (ONTRIBUTIONS MAINTAINED AS	S OF THE LAST DAY	\$	10,784.25
DALANCE	OF THE REPORTING	PERIOD			10,764.25
OUTSTANDING LOAN TOTALS	1	MOUNT OF ALL OUTSTANDING REPORTING PERIOD	LOANS AS OF THE	\$	0.00
.6 AFFIDAVIT					
			der penalty of perjury, t includes all information ion Code.		
			Ms. Mary Mal	lett	
			Signature of Campaigr	n Treasu	rer
AFFIX NOTAR)	Y STAMP / SEAL ABOVE				
Sworn to and subscribed	d before me, by the said		, this the		day
		hich, witness my hand and seal of			
		•			
Signature of officer ac	dministering oath	Printed name of officer administering	ng oath Titl	e of offic	er administering oath

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			3 of 11
17 COMMITTEE N Mesquite Rep	NAME Dublican Women's PAC	18 Filer ID 00017105	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1. X SC	CHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 565.00
2. SC	CHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SC	CHEDULE B: PLEDGED CONTRIBUTIONS		\$
	CHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABORGANIZATION)R	\$
	CHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA BOR ORGANIZATION	ATION OR	\$
6. SC	CHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$
	CHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR RGANIZATION		\$
8. SC	CHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9. SC	CHEDULE E: LOANS		\$
10. X SC	CHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 1,897.87
11. SC	CHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12. SC	CHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13. SC	CHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. SC	CHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
	CHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F O FILER	RETURNED	\$

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

Credit Card Payment	The Instruction Guide explains how to co	mplete th	nis form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 1/8 Rpt: 4/11	Mesquite Republican Women's PAC		00017105	
4 Date	5 Payee name		l	
02/27/2025	Amazon			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$60.57	325 9 th Ave. N.			
Expenditure from corporate funds	Seattle, WA 98109			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Des	scription	
OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Comp	lete Schedule T.
EXPENDITURE	·		Check if Austin, TX, officeholder living	expense
		De	cor	
O Companies ONLY if alice at	Overdidate/Office halden verse		O# : hl	-1
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ıgnt	Office hel	α
Date	Payee name			
02/27/2025	Amazon			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$89.80	325 9 th Ave. N.			
Expenditure from				
corporate funds	Seattle, WA 98109			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)		scription	
EXPENDITURE	Event Expense		Check if travel outside of Texas. Comp Check if Austin, TX, officeholder living	
		De		БАРСПЭС
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>ı </u>	Office hel	d
expenditure to benefit C/O	-1			
Date	Payee name			
03/14/2025	Amazon			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$54.08	325 9 th Ave. N.			
Expenditure from corporate funds	Seattle, WA 98109			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Dec	scription	
OF	Event Expense	· —	Check if travel outside of Texas. Comp	lete Schedule T.
EXPENDITURE			Check if Austin, TX, officeholder living	expense
		De	cor	
		<u> </u>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ıght	Office hel	d
3. p 2				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

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

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/8 Rpt: 5/11	Mesquite Republican Women's PAC	00017105
4 Date	5 Payee name	'
03/04/2025	Amazon	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$54.05	325 9 th Ave. N.	
Expenditure from corporate funds	Seattle, WA 98109	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Decor
		Decoi
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O		gnt Office field
Date	Payee name	
01/02/2025	American National Bank of Texas	
Amount (\$)	Payee address; City; State; Zip Co	de
\$5.38	PO Box 40	
Expenditure from		
corporate funds	Terrell, TX 75160	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
Date	Payee name	
01/10/2025	American National Bank of Texas	
Amount (\$)	Payee address; City; State; Zip Co	de
\$19.68	PO Box 40	
Evanditure from		
Expenditure from corporate funds	Terrell, TX 75160	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
experialitie to beliefft C/OI	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:			
Sch: 3/8 Rpt: 6/11	Mesquite Republican Women's PAC 00017105		
4 Date	5 Payee name		
02/03/2025	American National Bank of Texas		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$5.38	PO Box 40		
Expenditure from corporate funds	Terrell, TX 75160		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Bank Fees		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/O	4		
Date	Payee name		
02/10/2025	American National Bank of Texas		
Amount (\$)	Payee address; City; State; Zip Code		
\$16.75	PO Box 40		
,			
Expenditure from corporate funds	Terrell, TX 75160		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense Bank Fees		
	Dalk i ces		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·		
Date	Payee name		
03/03/2025	American National Bank of Texas		
Amount (\$)	Payee address; City; State; Zip Code		
\$5.38	PO Box 40		
Expenditure from			
corporate funds	Terrell, TX 75160		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.		
LXI LINDITORE	Check if Austin, TX, officeholder living expense		
	Bank Fees		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/8 Rpt: 7/11	Mesquite Republican Women's PAC	00017105
4 Date	5 Payee name	
03/10/2025	American National Bank of Texas	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$16.00	PO Box 40	
Expenditure from		
corporate funds	Terrell, TX 75160	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Bank Fees
		Bank 1 000
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI		9.10
Date	Payee name	
05/01/2025	American National Bank of Texas	
Amount (\$)	Payee address; City; State; Zip Co	nde
\$5.38	PO Box 40	
Ψ3.30	1 0 000 40	
Expenditure from corporate funds	Terrell, TX 75160	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Bank Fees
		24 333
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI		•
Date	Payee name	
06/02/2025	American National Bank of Texas	
Amount (\$)	Payee address; City; State; Zip Co	nde
\$5.38	PO Box 40	
, , , , ,		
Expenditure from corporate funds	Terrell, TX 75160	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
LXI LINDITORE		Check if Austin, TX, officeholder living expense
		Bank Fees
Commission ONII V if dispose	Condidate Office helder reces	Office head
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
•		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/8 Rpt: 8/11	Mesquite Republican Women's PAC 00017105
4 Date	5 Payee name
04/01/2025	American National Bank of Texas
6 Amount (\$) \$5.38	7 Payee address; City; State; Zip Code PO Box 40
Expenditure from corporate funds	Terrell, TX 75160
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Bank Fees
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/10/2025	American National Bank of Texas
Amount (\$)	Payee address; City; State; Zip Code
\$18.06	PO Box 40
- Evnanditura from	
Expenditure from corporate funds	Terrell, TX 75160
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/12/2025	American National Bank of Texas
Amount (\$)	Payee address; City; State; Zip Code
\$15.66	PO Box 40
Expenditure from corporate funds	Terrell, TX 75160
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense Bank Fees
	Dalik Fees
Complete CNII V if alia	Condidate/Officeholder name Office cought
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 7 1 0 1 1 5	
1 Total pages Schedule F1:	
Sch: 6/8 Rpt: 9/11	Mesquite Republican Women's PAC 00017105
4 Date	5 Payee name
06/27/2025	Burkett Enterprise Services of Texas, Inc
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$900.00	2917 Briarbrook Drive
Ψ300.00	2317 Bildiblook Blive
Expenditure from	
corporate funds	Seagoville, TX 75615
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Website & Hosting
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	⊣
Date	Douge name
	Payee name
02/06/2025	DCCRW
Amount (\$)	Payee address; City; State; Zip Code
\$62.00	10630 Chesterton Dr
Expenditure from corporate funds	Dallas, TX 75238
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Membership Fees
	Wiembership i des
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/61	'
Date	Payee name
03/10/2025	EnVogue
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	103 West Moore
φ100.00	103 West Modie
Expenditure from	
corporate funds	Terrell, TX 75160
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITUE	Gift/Awards/Memorials Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	President Gift
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/8 Rpt: 10/11	Mesquite Republican Women's PAC 00017105
4 Date	5 Payee name
05/23/2025	HelloFlowers.com
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$129.79	407 E Fort Street
Expenditure from corporate funds	Detroit, MI 48226
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Funeral Flowers
	i diletati towers
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
03/04/2025	Mallett, Mary (Mrs.)
Amount (\$)	Payee address; City; State; Zip Code
\$90.00	220 Toler Dr
Expenditure from corporate funds	Mesquite, TX 75149
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Meals
2 1 2 2 1 1 2 1 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/08/2025	Smith, Sandy (Mrs.)
Amount (\$)	Payee address; City; State; Zip Code
\$40.00	4523 Julian dr
Expenditure from corporate funds	Mesquite, TX 75150
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Training Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Leadership Training
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
experience to belief 6/6/	<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/8 Rpt: 11/11	Mesquite Republican Women's PAC 00017105
4 Date	5 Payee name
06/28/2025	TFRW
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$52.70	13740 N Highway 183
	Suite 34
Expenditure from corporate funds	Austin, TX 78750
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	☐ Check if Austin, TX, officeholder living expense Scholarship & Hospitality
	Scholarship & Hospitality
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	4
Date	Payee name
04/22/2025	VistaPrint
Amount (\$)	Payee address; City; State; Zip Code
\$146.45	275 Wyman St
Expenditure from corporate funds	Waltham, ME 02451
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Event Invitations
	Event invitations
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	