#### 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) 00054439 3 COMMITTEE NAME **OFFICE USE ONLY** Central Texas Republican Women Date Received **ELECTRONICALLY FILED** 07/15/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 24 Date Hand-delivered or Date Postmarked Change of Address Belton, TX 76513 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Wanita J. NAME NICKNAME LAST **SUFFIX** Reeder STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 4045 Tribute Lane STREET **ADDRESS** (Residence or Business) Belton, TX 76513 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 4045 Tribute Lane MAILING **ADDRESS** Belton, TX 76513 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (254) 681-5403 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** 04/24/2025 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

			T	
2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Central Texas Reput	olican Women		00054439	
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. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)	7. Supported		
		B. Opposed		
	Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)			
F CONTRIBUTION	1	DOLUTION CONTRIBUTIONS (OTHER THAN		
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)  qualifies for the higher itemization threshold	\$	2,345.00
	2. TOTAL POLITICA	L CONTRIBUTIONS	\$	4.059.20
	(OTHER THAN PLE	EDGES, LOANS, OR GUARANTEES OF LOANS)		4,958.20
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	125.92
	4. TOTAL POLITICA	L EXPENDITURES	\$	7,788.39
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	26,797.83
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
6 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
			7. 1 D. d.	
		Mirs. Wani Signature of Ca	ta J. Reeder	iror
		Signature of Ca	impaigii rreasu	iiei
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	oed before me, by the said _	, t	his the	day
		which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of offic	cer administering oath
oignature of officer	administering batti	. This hame of officer administering out	THE OF OHIC	sor administering batti

### **SUBTOTALS - GPAC**

### FORM GPAC COVER SHEET PG 3 3 of 24

				3 of 24
17 COMMITT	EE NAME	18 Filer ID	(Ethics Commissi	on Filers)
Central T	exas Republican Women	00054439		
	E SUBTOTALS SCHEDULE		SUBTOTAL	AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	4,408.20
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	550.00
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	2	\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$	
9. X	SCHEDULE E: LOANS		\$	0.00
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	7,788.39
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	0.00
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDULI	<b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 1/7 Rpt: 4/24	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Central Texa	as Republican Women				00054439	
4	Date 06/09/2025	<ul><li>5 Full name of contributor</li><li>Brown, Janet</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: ate; Zip Code	)	7	Amount of Contribution (\$)	\$50.00
		Belton, TX 76513					
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions Retired	5)		
	Date 05/19/2025	Full name of contributor Brown, Janet  Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$20.00
	Principal occu	Belton, TX 76513 pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	:) 		
	Retired	patient toob title (See motifications)	,	Retired	')		
	Date 04/24/2025	Full name of contributor Brown, Kathleen Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code	)		Amount of Contribution (\$)	\$70.00
		Temple, TX 76504					
	Principal occu Music Thera	pation / Job title (See Instructions)	)	Employer (See Instructions Baylor Scott & White	<u> </u> 5)		
	Date Full name of contributor out-of-state PAC (ID#:  06/19/2025 Canterino, Tony  Contributor address; City; State; Zip Code  Harker Heights, TX 76548				Amount of Contribution (\$)	\$20.00	
	Principal occu Engraver	pation / Job title (See Instructions)		Employer (See Instructions Anthony Joseph Jewele			
	Date 04/24/2025	Full name of contributor Chambers, Marcine Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$40.00
	Principal occu Developmen	pation / Job title (See Instructions) It Manager		Employer (See Instructions Salvation Army of Bell C		nty	

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how t	o complete this for	n.	1	Total pages Schedule A1: Sch: 2/7 Rpt: 5/24	
2	FILER NAME Central Texa	s Republican Women			3	Filer ID (Ethics Commission 00054439	n Filers)
4	Date 04/24/2025	6 Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code		7	Amount of Contribution (\$)	\$60.00
_	Dein ein et e e e	Temple, TX 76501	lo-	Formula var (Constructions			
8	Developmen	pation / Job title (See Instructions) t Manager	9	Employer (See Instructions Salvation Army of Bell C		ntv	
	Date 06/13/2025	Full name of contributor  DILILLO, MARLENE  Contributor address; City; State	e; Zip Code			Amount of Contribution (\$)	\$100.00
	Dringinal occur	HARKER HEIGHTS, TX 76	548	Employer (See Instructions			
	Retired	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 05/19/2025	Full name of contributor  DILILLO, MARLENE  Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$20.00
		HARKER HEIGHTS, TX 76	548				
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 05/07/2025	Full name of contributor  Demirs, Christina  Contributor address; City; State  Temple, TX 76502	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$170.00
	Principal occup Attorney	pation / Job title (See Instructions)		Employer (See Instructions City of Temple	)		
	Date 04/24/2025	Full name of contributor Fisher, Rosanne Contributor address; City; State Temple, TX 76502	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$60.00
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	Justice of the	e Peace, Prec 3 Pl 1		Bell County			

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 3/7 Rpt: 6/24	
2	FILER NAME	ıs Republican Women			3	Filer ID (Ethics Commission 00054439	n Filers)
_					Ļ		
4	Date 04/24/2025	<ul><li>5 Full name of contributor</li><li>Fisher, Rosanne</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$40.00
_		Temple, TX 76502					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Justice of the	e Peace, Prec 3 Pl 1		Bell County			
	Date 05/19/2025	Full name of contributor Fisher, Rosanne Contributor address; City; Sta	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$20.00
		Temple, TX 76502					
	Principal occu	pation / Job title (See Instructions)	)	Employer (See Instructions	5)		
	Justice of the Peace, Prec 3 Pl 1			Bell County			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Т	Amount of Contribution (\$)	
	06/09/2025	Ford , Leticia				(,,	\$100.00
		Contributor address; City; Sta Harker Heights , TX 76548					
	Dringinal occu	pation / Job title (See Instructions)		Employer (See Instructions	-, 		
	Realtor	pation / Job title (See Instructions,	<b>'</b>	Self-Employed	>)		
					_		
Date 04/24/2025		Full name of contributor Gildein, Janice Contributor address; City; Sta	out-of-state PAC (ID#:	)	•	Amount of Contribution (\$)	\$40.00
		Temple, TX 76502					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/24/2025	Gildein, Janice					\$40.00
		Contributor address; City; Sta Temple, TX 76502	ate; Zip Code		•		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired				•		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/7 Rpt: 7/24	
2	FILER NAME Central Texa	s Republican Women		3	Filer ID (Ethics Commission 00054439	n Filers)
4	Date 05/19/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$20.00
8	Principal occur	Temple, TX 76502 pation / Job title (See Instructions)	9 Employer (See Instructions	_		
0	Retired	Jalion / Job title (See instructions)	e Employer (See Instructions	')		
	Date 06/09/2025	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$200.00
		Harker Heights, TX 76548 Dation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired	_	(O 'I . ' . (A)	
	Date 05/19/2025	Full name of contributor out-of-state PAC (ID#:_ Jackson, Lynda  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
		Harker Heights, TX 76548				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date 06/09/2025	Full name of contributor out-of-state PAC (ID#:_ Minick, Louanna  Contributor address; City; State; Zip Code  Harker Heights, TX 76548			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	i)		
	Date 05/19/2025	Full name of contributor out-of-state PAC (ID#:_ Minick, Louanna  Contributor address; City; State; Zip Code  Harker Heights, TX 76548	)		Amount of Contribution (\$)	\$20.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	)		

	MONEI	ARY POLITICAL C	ONTRIBUTION	15		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 5/7 Rpt: 8/24	
2	FILER NAME Central Texa	as Republican Women			3	Filer ID (Ethics Commission 00054439	າ Filers)
4	Date 06/13/2025	Full name of contributor     Motz, Paul     Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code		7	Amount of Contribution (\$)	\$100.00
8	Dringing coor	Temple , TX 76504	<u></u>	Employer (See Instructions	<u></u>		
•	Court at Law		9	Employer (See Instructions Bell County	·)		
	Date 06/09/2025	Full name of contributor [ Petrich, Asha Contributor address; City; Sta Temple, TX 76501	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
	Principal occu Business Ow	upation / Job title (See Instructions)		Employer (See Instructions  Dominion General Conti		tore Inc	
	Date 05/19/2025	Full name of contributor  Petrich, Asha  Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$20.00
	Principal occu	Temple, TX 76501 upation / Job title (See Instructions)		Employer (See Instructions	 s)		
	Business Ow	vner		Dominion General Conti	rac	tors, Inc.	
	Date 04/24/2025	Full name of contributor Tong, Rebecca Contributor address; City; Sta Belton , TX 76513	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$70.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u>1</u>		
	Date 06/13/2025	Full name of contributor Tong, Rebecca Contributor address; City; Sta Belton , TX 76513	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$150.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		

	MONET	ARY POLITICAL C	ONTRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this form	n.	1	Total pages Schedule A1: Sch: 6/7 Rpt: 9/24	
2	FILER NAME Central Texa	ıs Republican Women			3	Filer ID (Ethics Commission 00054439	n Filers)
4	Date 05/19/2025	<ul><li>5 Full name of contributor Tong, Rebecca</li><li>6 Contributor address; City; Star</li></ul>	out-of-state PAC (ID#:te; Zip Code		7	Amount of Contribution (\$)	\$20.00
_	Daine in all a con-	Belton , TX 76513	lo.	Frankrik (Ozakaski sa			
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions Retired	5)		
	Date 04/24/2025	Full name of contributor [ Tonne, Mark  Contributor address; City; Star	out-of-state PAC (ID#:te; Zip Code	)		Amount of Contribution (\$)	\$100.00
	Principal occu	Belton, TX 76513 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Retired	,		Retired - UPS	,		
	Date 06/09/2025	Full name of contributor [ Warren, Zenia Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$100.00
		Killeen, TX 76542					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 05/19/2025	Full name of contributor [ Warren, Zenia Contributor address; City; State Killeen, TX 76542				Amount of Contribution (\$)	\$20.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 04/24/2025	Full name of contributor Wix.com Contributor address; City; Star San Franciso, CA 94140	out-of-state PAC (ID#: te; Zip Code	)		Amount of Contribution (\$)	\$3.52
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
			<b>'</b>				

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A	1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/24	
2	FILER NAME Central Texas Republican Women	3 Filer ID (Ethics Commission Filers 00054439	5)
4	Date 05/19/2025  5 Full name of contributor out-of-state PAC (ID#:	_) 7 Amount of Contribution (\$) \$1	7.56
	San Franciso, CA 94140		
8	Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)	uctions)	
	Date Full name of contributor out-of-state PAC (ID#:	_) Amount of Contribution (\$) \$	2.12
	Contributor address; City; State; Zip Code		
	San Franciso, CA 94140  Principal occupation / Job title (See Instructions)  Employer (See Instructions)	uctions)	

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Instru	uction Guide explains how to complete this f	form	1 Total pages Schedule A2:
The msuc	ction Guide explains now to complete this i	101111.	Sch: 1/1 Rpt: 11/24
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Central Tex	as Republican Women		00054439
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	BUTIONS	\$ 0.00
<b>5</b> Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution
04/24/2025	Tong, Rebecca		contribution (\$) description \$150.00   Bowie Knife - America
	7 Contributor address; City; State; Zip Code		First Commander in Chief
			i i
			<u> </u>
	Temple, TX 76502	1	Check if travel outside of Texas. Complete Schedule T.
	rupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	
Chaplain		Gentle Transitions	· · · · · · · · · · · · · · · · · · ·
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution
04/24/2025	<u> </u>		contribution (\$) description
	Contributor address; City; State; Zip Code		\$400.00   Fantasy Fused Opalescent Earrings
			I Parestern Earnings
	Temple, TX 76504		Check if travel outside of Texas. Complete Schedule T.
	supation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Jewelry De		Self-employed	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>	

PLEI	DGED CONTRIBU	TIONS				SCHEDULE B
Т	he Instruction Guide ex	plains how to compl	ete this form.	1	Total pages Sche Sch: 1/1 Rpt: 1	
2 FILER N	AME Texas Republican Women			3		hics Commission Filers)
<u></u>	OF UNITEMIZED PLED	GES			\$	0.00
<b>5</b> Date	6 Full name of pledgor	out-of-state PAC (ID	#:	_) 8	Amount of pledge (\$)	9 In-kind description (If applicable)
	7 Pledgor Address;	City; State; Zip Cod	е			
					Check if travel out	tside of Texas. Complete Schedule T.
<b>10</b> Principal	l occupation / Job title (See Instr	uctions)	11 Employer (See Ins	structi	ions)	

LOA	NS							so	CHEDULE	E
The Ins	struction	Guide explains h	ow to complete t	this fo	orm.	1		ges Schedule 1 Rpt: 13/2		
2 FILER N. Central		ublican Women				3	Filer ID 000544	(Ethics Con	nmission File	ers)
4 TOTAL	TOTAL OF UNITEMIZED LOANS					I		\$		0.00
5 Date of lo	oan <b>7</b>	Name of lender	out-of-s	tate PA	C (ID#:		)	9 Loan Am	nount (\$)	
6 Is lender financial institution		Lender address;	City; St	tate;	Zip Code			10 Interest		
								11 Maturity	Date	
<b>12</b> Principal	occupation .	/ Job title (See Instructi	ons)		13 Employer (See Instruct	ions)		•		
14 Descripti		eral			15 Check if personal funds	s were	deposited		account tructions)	
16 GUARAN INFORM		7 Name of guarantor		!				19 Amount	Guaranteed	(\$)
not a		8 Guarantor address;		tate;	Zip Code					
20 Principal	occupation				21 Employer (See Instruct	ions)		L		

#### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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: 1/11 Rpt: 14/24	Central Texas Republican Women 00054439
4 Date	5 Payee name
06/11/2025	Belton Chamber of Commerce
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$150.00	412 E. Central Avenue
Evpanditura from	
Expenditure from corporate funds	Belton, TX 76513
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Membership Dues Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	2025 Annual Membership Dues
	2020 / William World Duco
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
04/25/2025	Brown, Janet
Amount (\$)	Payee address; City; State; Zip Code
\$498.28	5 Branding Iron Drive
Expenditure from corporate funds	Belton, TX 76513
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Food for Trump Event
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
05/01/2025	Brown, Janet
Amount (\$)	Payee address; City; State; Zip Code
\$53.50	5 Branding Iron Drive
, 53.00	
Expenditure from corporate funds	Belton, TX 76513
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  National Day Of Prayer Cards
	National Day Of Flayer Cards
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### SCHEDULE F1

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

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

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: 2/11 Rpt: 15/24	Central Texas Republican Women 00054439	
4 Date	5 Payee name	
06/02/2025	Brown, Janet	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$431.92	5 Branding Iron Drive	
— Forest dit us from		
Expenditure from corporate funds	Belton, TX 76513	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense  Reimbursement for Grill for July Event	
	remindration of the following Event	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
·		_
Date	Payee name	
06/02/2025	Brown, Janet	
Amount (\$)	Payee address; City; State; Zip Code	
\$104.48	5 Branding Iron Drive	
Expenditure from corporate funds	Belton, TX 76513	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense  Reimbursement for Pins and Scarfs for July Event	
	remindusement for 1 ms and seams for stary Event	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	1	
Date	Payee name	
06/02/2025	Brown, Janet	
Amount (\$)	Payee address; City; State; Zip Code	_
\$203.44	5 Branding Iron Drive	
Expenditure from corporate funds	Belton, TX 76513	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Reimbursement Check if travel outside of Texas. Complete Schedule T.	
LA LABITORL	Check if Austin, TX, officeholder living expense	
	TFRW Convention Registration Fee	
0 1. 6		_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
- p		
		_

#### SCHEDULE F1

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

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

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

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

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: 3/11 Rpt: 16/24	Central Texas Republican Women 00054439
4 Date	5 Payee name
06/20/2025	Brown, Janet
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$425.00	5 Branding Iron Drive
Expenditure from corporate funds	Belton, TX 76513
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Reimbursement Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  NFRW Convention Registration Fee
	Wi NW Convention Registration Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
05/19/2025	Christians Engaged
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	8675 Explorer Drive
	Suite 112
Expenditure from corporate funds	Colorado Springs, CO 80920
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
	Donation for May's Speaker
Operation ONE Wife discont	On did to 10 ff as hald a grant Off as south
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u>'</u>	
Date	Payee name
05/19/2025	City of Belton
Amount (\$)	Payee address; City; State; Zip Code
\$220.00	333 Water Street
Expenditure from corporate funds	Belton, TX 76513
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Event Expense  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Harris Community Center Rental for May Luncheon
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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: 4/11 Rpt: 17/24	Central Texas Republican Women 00054439
4 Date	5 Payee name
06/02/2025	Demirs, Christina
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$203.44	3302 Edgewood Lane
Expenditure from corporate funds	Temple, TX 76502
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Reimbursement Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  TFRW Convention Registration Fee
	TERM Convention Registration Fee
O Complete ONEY'S	Condidate/Officeholder name
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/02/2025	Druce, Marlean
Amount (\$)	Payee address; City; State; Zip Code
\$203.44	2125 Grizzly Trail
Expenditure from corporate funds	Harker Heights, TX 76548
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Reimbursement Check if travel outside of Texas. Complete Schedule T.
_/	Check if Austin, TX, officeholder living expense
	TFRW Convention Registration Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ever	
Date	Payee name
04/24/2025	Instapay Services LLC
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	15511 W. Hwy 71, Ste 110-300
Expenditure from corporate funds	Bee Cave, TX 78738
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Fivent Expense  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Final Payment for Comedian for Trump Event
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### SCHEDULE F1

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

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	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: 5/11 Rpt: 18/24	Central Texas Republican Women 00054439
4 Date	5 Payee name
06/20/2025	Jackson, Lynda
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$203.44	704 Nacona Trail
Expenditure from corporate funds	Harker Heights, TX 76548
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Reimbursement Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  TFRW Convention Registration Fee
	TERM Convention Registration Fee
O Complete ONEY'S	Condidate/Officeholder name
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ever	
Date	Payee name
05/02/2025	Killeen Chamber Of Commerce
Amount (\$)	Payee address; City; State; Zip Code
\$325.00	1 Santa Fe Plaza Drive
·	
Expenditure from corporate funds	Killeen, TX 76541
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Membership Dues Check if travel outside of Texas. Complete Schedule T.
_/	Check if Austin, TX, officeholder living expense
	2025 Annual Membership
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Oi	1
Date	Payee name
06/17/2025	MailChimp
Amount (\$)	Payee address; City; State; Zip Code
\$21.32	675 Ponce De Leon Avenue NE, Ste 5000
<del>+102</del>	
Expenditure from corporate funds	Atlanta, GA 30308
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expanse  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	June Email Subscription Fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### 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 complete this form.	
1 Total pages Schedule F1:	: 2 FILER NAME 3 Filer ID (Ethics Cor	nmission Filers)
Sch: 6/11 Rpt: 19/24	Central Texas Republican Women 00054439	
4 Date	5 Payee name	
05/19/2025	Mc3 Catering	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,340.00	7441 FM 1123, Suite 2	
Expenditure from corporate funds	Belton, TX 76513	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule	Т.
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Food for May Luncheon Meeting	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held  OH	
<u> </u>		
Date	Payee name	
06/02/2025	McCleney, Sandra	
Amount (\$)	Payee address; City; State; Zip Code	
\$203.44	103 Orchid Drive	
Expenditure from		
corporate funds	Killeen, TX 76543	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Reimbursement Check if travel outside of Texas. Complete Schedule	Т.
	Check if Austin, TX, officeholder living expense TFRW Convention Registration Fee	
	THE CONVENTION REGISTRATION FOR	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	•	
Date	Payee name	
06/02/2025	Petrich, Asha	
Amount (\$)		
\$203.44		
Ψ203.44	ZIT N. Hall Succe	
Expenditure from	Tomple TV 76501	
corporate funds	Temple, TX 76501	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Reimbursement  Check if travel outside of Texas. Complete Schedule	т
EXPENDITURE	Reimbursement Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense	
	TFRW Convention Registration Fee	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	OH Control of the Con	

#### 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

Credit Card Payment	The Instruction Guide explains how to d	omplete this form.	a above,
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	•	nission Filers)
Sch: 7/11 Rpt: 20/24	Central Texas Republican Women	00054439	,
4 Date	5 Payee name	•	
06/02/2025	Reeder, Wanita		
6 Amount (\$)	7 Payee address; City; State; Zip C	ode	
\$203.44	4045 Tribute lane		
Expenditure from corporate funds	Belton, TX 76513		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
EXPENDITURE	Reimbursement	Check if travel outside of Texas. Complete Schedule T  Check if Austin, TX, officeholder living expense	
		TFRW Convention Registration Fee	
9 Complete ONLY if direct	Candidate/Officeholder name Office so	I Ight Office held	
expenditure to benefit C/OI		-	
Date	Payee name		
06/02/2025	Ruiz, Kathy		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$203.44	604 Dingo Circle		
+253.11			
Expenditure from corporate funds	Harker Heights , TX 76548		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
EXPENDITURE	Reimbursement	Check if travel outside of Texas. Complete Schedule T  Check if Austin, TX, officeholder living expense	
		TFRW Convention Registration Fee	
Complete ONLY if direct	Candidate/Officeholder name Office so	I Ight Office held	
expenditure to benefit C/OI	<del>1</del>		
Date	Payee name		
06/03/2025	Ruiz, Kathy		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$48.71	604 Dingo Circle		
Expenditure from corporate funds	Harker Heights , TX 76548		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Reimbursement	Check if travel outside of Texas. Complete Schedule T	
··-		Check if Austin, TX, officeholder living expense  3 Name Badges	
		J Name Dauges	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	lght Office held	
expenditure to benefit C/OI		Office field	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 8/11 Rpt: 21/24	Central Texas Republican Women 00054439	
4 Date	5 Payee name	
06/20/2025	Ruiz, Kathy	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$32.48	604 Dingo Circle	
Expenditure from corporate funds	Harker Heights , TX 76548	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Reimbursement	
	Check if Austin, TX, officeholder living expense	
	Name Badges - 2	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
Date	Payee name	
05/01/2025	TFRW PAC	
Amount (\$)	Payee address; City; State; Zip Code	_
\$75.90	515 Capitol of Texas Highway Ste 133	
Ψ10.50	o to explicit of Texas Flighway etc 100	
Expenditure from corporate funds	Austin, TX 78746	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Membership Dues	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Submission #8 - 3 members	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	=
06/02/2025	TFRW PAC	
		_
Amount (\$)		
\$104.48	515 Capitol of Texas Highway Ste 133	
Expenditure from corporate funds	Austin, TX 78746	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Event Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Pins & Scarf Purchase for July Event	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	Н	
		_

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal manua Cabadula E4.	O FILED MANE
1 Total pages Schedule F1: Sch: 9/11 Rpt: 22/24	2 FILER NAME Central Texas Republican Women 3 Filer ID (Ethics Commission Filers) 00054439
4 Date	5 Payee name
05/28/2025	TFRW PAC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$75.90	515 Capitol of Texas Highway Ste 133
Expenditure from	Averlie TV 7074C
corporate funds	Austin, TX 78746
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Membership Dues Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Submission #9
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Dayso name
	Payee name
05/29/2025	TFRW PAC
Amount (\$)	Payee address; City; State; Zip Code
\$75.90	515 Capitol of Texas Highway Ste 133
Expenditure from corporate funds	Austin, TX 78746
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITUE	Membership Dues
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Submission #10
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>	
Date	Payee name
06/20/2025	TFRW PAC
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	515 Capitol of Texas Highway Ste 133
4200.00	out out to the result of the control
Expenditure from corporate funds	Austin, TX 78746
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Event Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Silver Sponsorship for TFRW Convention
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### 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

Credit Card Payment	The Instruction Guide explains how to c	complete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 10/11 Rpt: 23/24	Central Texas Republican Women	00054439
4 Date	5 Payee name	<u>'</u>
05/07/2025	Tax 990	
6 Amount (\$) \$199.90	7 Payee address; City; State; Zip C 2685 Celanese Road Suite 100	Code
Expenditure from corporate funds	Rock Hill, SC 29732	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  IRS 990 Filing
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office so	ought Office held
Date	Payee name	
06/02/2025	Tong, Rebecca	
Amount (\$)	Payee address; City; State; Zip C	Code
\$203.44	2130 Allena Lane	
Expenditure from corporate funds	Temple, TX 76542	Tax
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Reimbursement	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  TFRW Convention Registration Fee
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office so	ought Office held
Date	Payee name	
06/20/2025	Tong, Rebecca	
Amount (\$) \$425.00	Payee address; City; State; Zip C 2130 Allena Lane	Code
Expenditure from corporate funds	Temple, TX 76542	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Reimbursement	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  NFRW Convention Registration Fee
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office so	ought Office held

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contribution/ Onations Made By -

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

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

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

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: 11/11 Rpt: 24/24	Central Texas Republican Women 00054439
4 Date	5 Payee name
04/24/2025	WIX.COM
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3.65	PO BOX 40190
Expenditure from	
corporate funds	SAN FRANCISCO, CA 94140
8 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
	Fee for Tickets for Trump Event
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
05/16/2025	WIX.COM
Amount (\$)	Payee address; City; State; Zip Code
\$179.34	PO BOX 40190
Expenditure from corporate funds	SAN FRANCISCO, CA 94140
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Annual Business Email Subscription
	, amaa 200moo 2man casaanpaan
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/13/2025	WIX.COM
Amount (\$)	Payee address; City; State; Zip Code
\$40.75	PO BOX 40190
Expenditure from corporate funds	SAN FRANCISCO, CA 94140
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Event Ticket Fees for July Event
	Event Floret Fees for July Event
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	