

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00034370	2 Total pages filed: 17	
3 COMMITTEE NAME Bay Area Republican Women PAC			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/15/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 58103 Webster, TX 77598-8103			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Marcella J. ----- NICKNAME LAST SUFFIX Erwin			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4811 Stone Harbor Dr. Friendswood, TX 77546			
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4811 Stone Harbor Dr. Friendswood, TX 77546			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (281) 794-3873			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff			
10 PERIOD COVERED	Month Day Year Month Day Year 01/01/2025 THROUGH 06/30/2025			
11 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Bay Area Republican Women PAC	13 Filer ID (Ethics Commission Filers) 00034370
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,380.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,138.41
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 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.

Ms. Marcella J. Erwin

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**FORM GPAC**
COVER SHEET PG 3
3 of 17

17 COMMITTEE NAME Bay Area Republican Women PAC		18 Filer ID (Ethics Commission Filers) 00034370
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,380.00
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	\$ 4,138.41
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/9 Rpt: 4/17
2 FILER NAME Bay Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00034370
4 Date 05/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bourjourne, Raquel <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77259	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Bourjourne Builds
Date 01/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyd, Erin <hr/> Contributor address; City; State; Zip Code Houston, TX 77058	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Marketing Director		Employer (See Instructions) Compass Resourcing Group
Date 01/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyd, James <hr/> Contributor address; City; State; Zip Code Houston, TX 77058	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Marketing Director		Employer (See Instructions) Compass Resourcing Group
Date 01/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briggs, Sarah <hr/> Contributor address; City; State; Zip Code Seabrook, TX 77586	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brumfield, Valerie <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) UTMB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/9 Rpt: 5/17
2 FILER NAME Bay Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00034370
4 Date 02/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Twila <hr/> 6 Contributor address; City; State; Zip Code Kingwood, TX 77345	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Houston City Council Member		9 Employer (See Instructions) City of Houston
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Emmeline <hr/> Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dow, Christine <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dow, Christine <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foshee, Jenrose <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/9 Rpt: 6/17
2 FILER NAME Bay Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00034370
4 Date 02/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frawley, Alice 6 Contributor address; City; State; Zip Code Houston, TX 77058	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Business Owner
Date 02/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fryday, Jacque Contributor address; City; State; Zip Code Seabrook, TX 77586	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Technical Writer		Employer (See Instructions)
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guice, Linda Contributor address; City; State; Zip Code Houston, TX 77062-2278	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Karen Contributor address; City; State; Zip Code LaPorte, TX 77571	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haydell, Jeanette Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/9 Rpt: 7/17
2 FILER NAME Bay Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00034370
4 Date 01/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holland, Edie <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77034	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobs, Joyce <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Corporate Paralegal		Employer (See Instructions) Siemens Industry Inc
Date 01/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kruse, Jordin <hr/> Contributor address; City; State; Zip Code Houston, TX 77058	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuecker, Dianne <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/9 Rpt: 8/17
2 FILER NAME Bay Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00034370
4 Date 01/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lake, Betsy <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77059-6506	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 02/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindamood, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Briana <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) District Director		Employer (See Instructions) Texas Senate
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Stephanie <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McFarland, Wendy <hr/> Contributor address; City; State; Zip Code Kemah, TX 77565	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/9 Rpt: 9/17
2 FILER NAME Bay Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00034370
4 Date 03/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, Mayes <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77553	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) President-Oil Co		9 Employer (See Instructions) Middleton Oil Co
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nenninger, Kathleen <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) North, Linda <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Connor, Kimberly <hr/> Contributor address; City; State; Zip Code Seabrook, TX 77586	Amount of Contribution (\$) \$35.00
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#: _____) Perry, Velma <hr/> Contributor address; City; State; Zip Code Angleton, TX 77515	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/9 Rpt: 10/17
2 FILER NAME Bay Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00034370
4 Date 03/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelan, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Pasadena, TX 77505	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Director of Engagement		9 Employer (See Instructions) Conscious Discipline
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Risinger, Debra <hr/> Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Software Test Engineer		Employer (See Instructions) Cimarron Software Services
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Risinger, Richard <hr/> Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Judge/Attorney		Employer (See Instructions)
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Shelley <hr/> Contributor address; City; State; Zip Code Seabrook, TX 77586	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Pres Ace Scholarships Houston		Employer (See Instructions) Pres Ace Scholarships Houston
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salars, Sandra <hr/> Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/9 Rpt: 11/17
2 FILER NAME Bay Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00034370
4 Date 01/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephenson, Dina 6 Contributor address; City; State; Zip Code Houston, TX 77062	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 02/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tacquard, Phyllis Contributor address; City; State; Zip Code Houston, TX 77058	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanner, Stephanie Contributor address; City; State; Zip Code Pearland, TX 77581	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) District Director		Employer (See Instructions) Mayes Middleton
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Joyce Contributor address; City; State; Zip Code El Lago, TX 77586-6020	Amount of Contribution (\$) \$35.00
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#: _____) Teter, Rex Contributor address; City; State; Zip Code Pasadena, TX 77503	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Minister		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 9/9 Rpt: 12/17

2 FILER NAME

Bay Area Republican Women PAC

3 Filer ID (Ethics Commission Filers)
00034370

4 Date
03/04/2025

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Teter, Rex

7 Amount of Contribution (\$) \$50.00

6 Contributor address; City; State; Zip Code

Pasadena, TX 77503

8 Principal occupation / Job title (See Instructions)

Minister

9 Employer (See Instructions)

Date
04/07/2025

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Teter, Rex

Amount of Contribution (\$) \$50.00

Contributor address; City; State; Zip Code

Pasadena, TX 77503

Principal occupation / Job title (See Instructions)

Minister

Employer (See Instructions)

Date
03/24/2025

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Williamson, Holly (Judge)

Amount of Contribution (\$) \$35.00

Contributor address; City; State; Zip Code

Houston, TX 77258

Principal occupation / Job title (See Instructions)

Judge

Employer (See Instructions)

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.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 13/17	2 FILER NAME Bay Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00034370
4 Date 02/24/2025	5 Payee name Bay Area Meals on Wheels	
6 Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 14045 Space Center Blvd Houston, TX 77062	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 honor of speaker-Michaela Vaughn (January)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/13/2025	Payee name Bay Area Meals on Wheels	
Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14045 Space Center Blvd Houston, TX 77062	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 honor of Speaker -Alexandra del Moral Meeler
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/13/2025	Payee name Bay Area Meals on Wheels	
Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14045 Space Center Blvd Houston, TX 77062	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 honor of Speaker- Julie Pickren (March)
Complete <u>ONLY</u> 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.

1 Total pages Schedule F1: Sch: 2/5 Rpt: 14/17	2 FILER NAME Bay Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00034370
4 Date 04/24/2025	5 Payee name Bay Oaks Country Club	
6 Amount (\$) \$164.89 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 14545 Bay Oaks Blvd Houston, TX 77059	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Difference of reservations and price-Lunch Meeting 4/22/2025
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/10/2025	Payee name Clear Lake Chamber of Commerce	
Amount (\$) \$289.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1201 E Nasa Parkway Houston, TX 77058	
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 Dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/06/2025	Payee name Extra Space #3478	
Amount (\$) \$1,104.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14102 Bay Point Ct Houston, TX 77062	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent and Insurance for Storage Unit #290
Complete <u>ONLY</u> 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.

1 Total pages Schedule F1: Sch: 3/5 Rpt: 15/17	2 FILER NAME Bay Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00034370
4 Date 01/17/2025	5 Payee name GHCFRW PAC	
6 Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code C/O KAREN MCCARTER 5418 CHERRY RIDGE ROAD RICHMOND, TX 77406	
8 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 Dues 2025
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/24/2025	Payee name Risinger, Debra	
Amount (\$) \$258.86 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4919 Preston Trails Lane Pasadena, TX 77505-4161	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Use of Meeting room at Bay Oaks Country Club for Board Meetings
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2025	Payee name Square	
Amount (\$) \$23.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St., Suite 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees for memberships thru Square. January 1 - June 30, 2025
Complete <u>ONLY</u> 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.

1 Total pages Schedule F1: Sch: 4/5 Rpt: 16/17	2 FILER NAME Bay Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00034370
4 Date 04/23/2025	5 Payee name Square	
6 Amount (\$) \$70.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1455 Market St., Suite 600 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Memberships paid 2 x's Reimburse - Stephanie Long
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/21/2025	Candidate/Officeholder name TFRW	
Amount (\$) \$945.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 171146 Austin, TX 78717	
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 Annual Fee 2025 - \$20.00 TFRW Members - \$925.00
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/18/2025	Candidate/Officeholder name Texas Comptroller of Public Accounts	
Amount (\$) \$164.17 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 13528 Austin, TX 78711	
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 Sales Tax: January 1 - June 30, 2025 (Grimes)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 17/17	2 FILER NAME Bay Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00034370
4 Date 04/13/2025	5 Payee name Texas Comptroller of Public Accounts	
6 Amount (\$) \$164.17 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 13528 Austin, TX 78711	
8 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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Sales Tax - Jan 1 - June 30, 2025 (McFarland)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Texas Federation of Republican Women		
Amount (\$) \$575.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 171146 Austin, TX 78717-0041	
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 TFRW Members-Submission #2
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/24/2025	Candidate/Officeholder name Office sought Office held	
Payee name Texas Federation of Republican Women		
Amount (\$) \$275.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 171146 Austin, TX 78717-0041	
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 Submission #3
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		