

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers) 00029579		2 Total pages filed: 99		OFFICE USE ONLY	
3 COMMITTEE NAME Lubbock Area Republican Women PAC				Date Received ELECTRONICALLY FILED 07/15/2025	
4 TREASURER NAME Moriarty, Sharma L.				Date Hand-delivered or Date Postmarked	
5 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election		<input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer resignation <input type="checkbox"/> Dissolution report <input type="checkbox"/> Other (specify) _____	
6 ORIGINAL PERIOD COVERED		Month Day Year 01/01/2025		THROUGH Month Day Year 06/30/2025	
				Receipt # Amount	
				Date Processed	
				Date Imaged	

7 EXPLANATION OF CORRECTION
Recording outstanding expenses that were not previously entered.

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

☒ **Semiannual reports:** I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☐ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Sharma L. Moriarty

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

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) 00029579	2 Total pages filed: 99	
3 COMMITTEE NAME Lubbock Area Republican Women PAC			OFFICE USE ONLY	
			Date Received ELECTRONICALLY FILED 07/15/2025	
			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address			ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 6315 Lubbock, TX 79493-6315	
5 CAMPAIGN TREASURER NAME			MS / MRS / MR FIRST MI Sharma L.	
			NICKNAME LAST SUFFIX Moriarty	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)			STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 12513 Quaker Ave. Ste. B Lubbock, TX 79424	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address			STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 12513 Quaker Ave. Ste. B Lubbock, TX 79424	
8 CAMPAIGN TREASURER PHONE			AREA CODE PHONE NUMBER EXTENSION (806) 470-5277	
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 01/01/2025 THROUGH Month Day Year 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	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Lubbock Area Republican Women PAC		13 Filer ID (Ethics Commission Filers) 00029579
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
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 17,490.17
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 189.16
	4. TOTAL POLITICAL EXPENDITURES	\$ 106,353.76
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 17,028.79
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.

Sharma L. Moriarty

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
4 of 99

17 COMMITTEE NAME Lubbock Area Republican Women PAC		18 Filer ID (Ethics Commission Filers) 00029579
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 17,490.17
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	\$ 106,353.76
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input 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: 1/55 Rpt: 5/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aday, Sharon <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79407	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aday, Sharon <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agosta, Carol <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguilar, Peggy (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Kevin <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lung Specialist		Employer (See Instructions) UMC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/55 Rpt: 6/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Kevin <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79412	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) Lung Specialist		9 Employer (See Instructions) UMC Internal Medicine
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Kevin <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Lung Specialist		Employer (See Instructions) UMC Internal Medicine
Date 03/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allmon, Sharon <hr/> Contributor address; City; State; Zip Code Lorenzo, TX 79343	Amount of Contribution (\$) \$51.26
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ammons, Paula <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Goodwill Industries of Lubbock, Inc
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ammons, Paula <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Goodwill Industries of Lubbock, Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/55 Rpt: 7/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Jane (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79413	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Designer		9 Employer (See Instructions) Self
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Askew, Benna (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atcheson, Judi (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) na
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atcheson, Judi (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$22.55
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) na
Date 03/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellows, Amber <hr/> Contributor address; City; State; Zip Code Plainview, TX 79072	Amount of Contribution (\$) \$0.00
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: 4/55 Rpt: 8/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellows, Amber <hr/> 6 Contributor address; City; State; Zip Code Plainview, TX 79072	7 Amount of Contribution (\$) \$120.98
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berrier, Vicki <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berrier, Vicki <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blevins, Sherri <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Botello, Diane (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	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: 5/55 Rpt: 9/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braswell, Mary-Kathryn (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Idalou, TX 79329	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, MaryAnn <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79464	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, MaryAnn <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79464	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, MaryAnn <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79464	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brumley, Jan <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) UMC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/55 Rpt: 10/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brummett, Tom (Mr.) 6 Contributor address; City; State; Zip Code Wolfforth, TX 79382	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Assistant District Attorney		9 Employer (See Instructions) Lubbock County
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Pat Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Pat Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Pat Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Pat Contributor address; City; State; Zip Code Lubbock, TX 79423	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: 7/55 Rpt: 11/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 06/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Pat 6 Contributor address; City; State; Zip Code Lubbock, TX 79423	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrows, Dustin Contributor address; City; State; Zip Code Lubbock, TX 79408	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrows, Elizabeth Contributor address; City; State; Zip Code Lubbock, TX 79408	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrows, Gail Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrows, Gail Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/55 Rpt: 12/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 06/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callander, Debbie <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79424	7 Amount of Contribution (\$) \$20.50
8 Principal occupation / Job title (See Instructions) Administrator		9 Employer (See Instructions) CallanderHouse
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calloway, Judy <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$25.63
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campaign for Charles Perry <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79493	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cansino, Jane <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cansino, Jane <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/55 Rpt: 13/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cansino, Jane <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79407	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions)
Date 03/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cansino, Jane <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$25.63
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cansino, Jane <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cansino, Jane <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cansino, Jane (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Grassroots Engagement Director		Employer (See Instructions) Americans For Prosperity

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/55 Rpt: 14/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cansino, Lance (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79407	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions)
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cansino, Lance (Mr.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chamales, Alexander (Mr.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424-0745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chamales, Melissa (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424-0745	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chauncey, Kathy (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/55 Rpt: 15/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chauncey, Kathy (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79424	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chauncey, Kathy (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chauncey, Kathy (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chauncey, Kathy (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$25.63
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chauncey, Kathy (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/55 Rpt: 16/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 06/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chauncey, Kathy (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79424	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cherry, Susan (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$0.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cherry, Susan (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$23.96
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clare, Joni (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 04/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clare, Joni (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/55 Rpt: 17/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Deanne (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79413	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Deanne (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 04/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Deanne (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Donita (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Donita (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/55 Rpt: 18/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Donita (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79424	7 Amount of Contribution (\$) \$25.63
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Briana <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 04/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotter, Joanne (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$45.10
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Pat (Mrs.) <hr/> Contributor address; City; State; Zip Code Levelland, TX 79336	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Lisa <hr/> Contributor address; City; State; Zip Code Shallowater, TX 79363	Amount of Contribution (\$) \$25.63
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: 15/55 Rpt: 19/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Bobbe <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79423	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crim, Pamela (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Criswell, Carol (Mrs.) <hr/> Contributor address; City; State; Zip Code Ransom Canyon, TX 79366	Amount of Contribution (\$) \$20.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Criswell, Carol (Mrs.) <hr/> Contributor address; City; State; Zip Code Ransom Canyon, TX 79366	Amount of Contribution (\$) \$20.50
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#: _____) Crow, Matt <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79401	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Campaign for Dustin Burrows		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/55 Rpt: 20/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crow, Matt <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79401	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Campaign for Dustin Burrows		9 Employer (See Instructions)
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crow, Matt <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79401	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Campaign for Dustin Burrows		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daily, Diane <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daily, Diane <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalby, Mike (Mr.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Corporate Pilot		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/55 Rpt: 21/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dinwiddie, Beverly 6 Contributor address; City; State; Zip Code Lubbock, TX 79424	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dinwiddie, Beverly Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dinwiddie, Steve Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dinwiddie, Steve Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorman, Yvonne Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/55 Rpt: 22/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 05/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorman, Yvonne <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79423	7 Amount of Contribution (\$) \$20.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 01/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunlap, Laura <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Housewife		Employer (See Instructions)
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunlap, LeighAnne (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Keller Williams
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dusenberry, Anissa <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Radiologic Technologist		Employer (See Instructions)
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Jennifer <hr/> Contributor address; City; State; Zip Code Ransom Canyon, TX 79366	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/55 Rpt: 23/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Ransom Canyon, TX 79366	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Administrative Assistant		9 Employer (See Instructions)
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Jennifer <hr/> Contributor address; City; State; Zip Code Ransom Canyon, TX 79366	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions)
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Jennifer <hr/> Contributor address; City; State; Zip Code Ransom Canyon, TX 79366	Amount of Contribution (\$) \$20.50
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliot, Lacy <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) StarCare Lubbock
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Englund, Connie (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	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: 20/55 Rpt: 24/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Steve (Mr.) 6 Contributor address; City; State; Zip Code Lubbock, TX 79414	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Management		9 Employer (See Instructions) Self
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Steve (Mr.) Contributor address; City; State; Zip Code Lubbock, TX 79414	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Management		Employer (See Instructions) Self
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Steve (Mr.) Contributor address; City; State; Zip Code Lubbock, TX 79414	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Management		Employer (See Instructions) Self
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrell, Judy (Mrs.) Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felton, Esther Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Database Manager		Employer (See Instructions) Lubbock Area United Way

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/55 Rpt: 25/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Leticia (Mrs.) 6 Contributor address; City; State; Zip Code Lubbock, TX 79403	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) SVP		9 Employer (See Instructions) EntraVision Communications
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Victor (Mr.) Contributor address; City; State; Zip Code Lubbock, TX 79403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Walk By Faith Radio
Date 01/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forbes, Penny (Mrs.) Contributor address; City; State; Zip Code O'Donnell, TX 79351	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frederick, Jennifer Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Hillside Christian Church
Date 04/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frederick, Jennifer Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Hillside Christian Church

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/55 Rpt: 26/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freier, Patty (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79424	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Registered Nurse		9 Employer (See Instructions) Covenant Health Hospital
Date 04/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freier, Patty (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Covenant Health Hospital
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuhrman, Gretchen (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Heather <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 03/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Heather <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$0.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/55 Rpt: 27/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Heather <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79424	7 Amount of Contribution (\$) \$23.96
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions)
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Heather <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$20.50
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Heather <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$20.50
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Girolamo, Lois <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Toolex, Inc
Date 01/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glasheen, David (Mr.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Glasheen Inderman & Valles

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/55 Rpt: 28/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glasheen, Mary (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79423	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Dentist		9 Employer (See Instructions) Self
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Sheryl (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$20.50
Principal occupation / Job title (See Instructions) Worker		Employer (See Instructions) Project Destiny
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Sheryl (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Worker		Employer (See Instructions) Project Destiny
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Sara (Ms.) <hr/> Contributor address; City; State; Zip Code Wolfforth, TX 79382	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Francisco (Mr.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79415-2834	Amount of Contribution (\$) \$25.00
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: 25/55 Rpt: 29/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Isabel (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79424	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hackert, Jeanne (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hargrave, Jolynda (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79416	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Kay <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79410	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Laura (Mrs.) <hr/> Contributor address; City; State; Zip Code Hart, TX 79043	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/55 Rpt: 30/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hays, Phillip <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79424	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Texas 99th District Court
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hays, Phillip <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$44.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas 99th District Court
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hays, Tricia <hr/> Contributor address; City; State; Zip Code lubbock, TX 79424	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Coordinator, Child Nutrition		Employer (See Instructions)
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helton, Samantha (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79416	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrin, Gay (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79416	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: 27/55 Rpt: 31/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrin, Gay (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79416	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrin, Ron <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79416	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hesse, Lisa <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hesse, Lisa <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hesse, Lisa <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$80.00
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: 28/55 Rpt: 32/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hesse, Lisa 6 Contributor address; City; State; Zip Code Lubbock, TX 79410	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hesse, Lisa Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hesse, Lisa Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hesse, Lisa Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Diane Contributor address; City; State; Zip Code Lubbock, TX 79403	Amount of Contribution (\$) \$25.63
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: 29/55 Rpt: 33/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hocker, Heather (Judge) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79416	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Secretary		9 Employer (See Instructions) The CH Foundation
Date 01/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hocker, Mark (Judge) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79416	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Judge - Lbk Co Court at Law 1		Employer (See Instructions) Lubbock County
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodge, Kenlea <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Speech Pathology		Employer (See Instructions) Caprock Behavioral Solutions
Date 03/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hohenberger, Holli <hr/> Contributor address; City; State; Zip Code Shallowater, TX 79363	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Program Supervisor V		Employer (See Instructions) Department of Public Safety
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffmon, Jessica <hr/> Contributor address; City; State; Zip Code Wilson, TX 79381	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/55 Rpt: 34/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffmon, Jessica <hr/> 6 Contributor address; City; State; Zip Code Wilson, TX 79381	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) Real Estate Agent		9 Employer (See Instructions) Self Employed
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffmon, Jessica <hr/> Contributor address; City; State; Zip Code Wilson, TX 79381	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions) Self Employed
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchison, Anslie <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PM Pediatrics		Employer (See Instructions) Texas Tech University
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jobe, Joan (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79403	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Carla <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/55 Rpt: 35/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Phil (Judge) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79412	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Yvette <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Addison Homes
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Yvette <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$22.55
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Addison Homes
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Yvette <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$20.50
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Addison Homes
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Cassidy <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79493	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Campaign Office Manager		Employer (See Instructions) Texans for Jodey Arrington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/55 Rpt: 36/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kemper, Cindy <hr/> 6 Contributor address; City; State; Zip Code Lubbock , TX 79404	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kemper, Cindy <hr/> Contributor address; City; State; Zip Code Lubbock , TX 79404	Amount of Contribution (\$) \$20.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kemper, Cindy <hr/> Contributor address; City; State; Zip Code Lubbock , TX 79404	Amount of Contribution (\$) \$20.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kincanon, Gary (Mr.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79414	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kincer, Norma (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79404	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: 33/55 Rpt: 37/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kincer, Norma (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79404	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Amy (Mrs.) <hr/> Contributor address; City; State; Zip Code Abernathy, TX 79311	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Kris (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions)
Date 04/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Kris (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$45.10
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kittridge, Anita <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	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: 34/55 Rpt: 38/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehnen, Eleah (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79424	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Grassroots		9 Employer (See Instructions) West4Pac
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Catherine <hr/> Contributor address; City; State; Zip Code Sandy Point, TX 77583	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) City Secretary		Employer (See Instructions)
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Looke, Joanne <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79416	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Carolyn (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Joni (Mrs.) <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$25.00
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: 35/55 Rpt: 39/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Joni (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code San Angelo, TX 76901	7 Amount of Contribution (\$) \$25.63
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) May, Donald <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79408	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) May, Jane (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79408	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Farm Manager		Employer (See Instructions) Self
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) May, Jane (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79408	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Farm Manager		Employer (See Instructions) Self
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) May, Jane (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79408	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Farm Manager		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/55 Rpt: 40/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBrayer, Cindy (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79410	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Campus Minister		9 Employer (See Instructions) Texas Tech BSU
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBrayer, Mark (Mr.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Crenshaw Dupree & Milam
Date 01/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCay, Bill (Mr.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meeks, Linda <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Insurance Claims		Employer (See Instructions) Owner
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menjares, Anah (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Westar Realty

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/55 Rpt: 41/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messinger, John <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78711	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) Place 2 Judge		9 Employer (See Instructions) Texas Third District Court of Appeals
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Gwen (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79414	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moriarty, Sharma <hr/> Contributor address; City; State; Zip Code Wolfforth, TX 79382	Amount of Contribution (\$) \$25.63
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moriarty, Sharma <hr/> Contributor address; City; State; Zip Code Wolfforth, TX 79382	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mullin, Melinda <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Lead Case Manager		Employer (See Instructions) Hospice of Lubbock Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/55 Rpt: 42/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murfee, Marilyn (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79424	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Gwendolyon (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Briant, Mary (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$20.50
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) On, Carole <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$41.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 01/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orndorff, Kayla <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79409	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Public Policy Intern		Employer (See Instructions) United States Senate

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/55 Rpt: 43/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Burley (Mr.) 6 Contributor address; City; State; Zip Code Lubbock, TX 79423	7 Amount of Contribution (\$) \$20.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Mary (Mrs.) Contributor address; City; State; Zip Code Lubbock, TX 79408	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) District Director		Employer (See Instructions) Senator Ted Cruz
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padgett, Elizabeth (Mrs.) Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padgett, Elizabeth (Mrs.) Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$20.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Jeffrey Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$100.00
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: 40/55 Rpt: 44/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pechackoa, Monika (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79423	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) director		9 Employer (See Instructions) IFT Services
Date 03/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pechackoa, Monika (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$25.63
Principal occupation / Job title (See Instructions) director		Employer (See Instructions) IFT Services
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peoples Bank <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$1,464.65
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Susan (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Susan (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$25.63
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/55 Rpt: 45/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinion , Kelly (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79408	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) County Clerk		9 Employer (See Instructions) Lubbock County
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinion , Kelly (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79408	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) County Clerk		Employer (See Instructions) Lubbock County
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Jan (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Danny <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79464	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Prentiss <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Realestate		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/55 Rpt: 46/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pugh, John (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79423	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retail Mgmt		9 Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ragland, Melanie (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions)
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ragland, Melanie (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) \$21.05
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ragland, Melanie (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) \$25.63
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions)
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ragland, Melanie (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) \$23.96
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/55 Rpt: 47/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 05/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ragland, Melanie (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79412	7 Amount of Contribution (\$) \$20.50
8 Principal occupation / Job title (See Instructions) Retired Teacher		9 Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Laura (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Laura (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Diane <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$25.63
Principal occupation / Job title (See Instructions) Senior Legislative Policy Manager		Employer (See Instructions) Texas Dental Association
Date 04/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Janice (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Flex

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/55 Rpt: 48/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 06/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivas, Florence (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79414	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Linda <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Linda <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Linda <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sammons, Roxie <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$100.00
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: 45/55 Rpt: 49/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Sandra (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79415	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoppa, Candy (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79403	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scioli, Sharon (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Allen (Mr.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self-Employed
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Gretchen (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) na

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/55 Rpt: 50/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Gretchen (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79413	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) na
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Gretchen (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$22.55
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) na
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Krysti (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) A.S. Dent Shop
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Stephen <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions)
Date 04/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scully, Mikela <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/55 Rpt: 51/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Settler, Roger (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79401	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Penny <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79411	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Lubbock International House of Prayer
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Penny <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79411	Amount of Contribution (\$) \$20.50
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Lubbock International House of Prayer
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sjue, Jessie (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Missy (Mrs.) <hr/> Contributor address; City; State; Zip Code Ransom Canyon, TX 79366	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/55 Rpt: 52/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Dana (Mrs.) 6 Contributor address; City; State; Zip Code Lubbock, TX 79407	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanek, Sunshine (Mrs.) Contributor address; City; State; Zip Code Lubbock, TX 79408	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) District Attorney		Employer (See Instructions) Lubbock County
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stell, Susie (Mrs.) Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Director of Accounting		Employer (See Instructions) Stellar Companies
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stell, Susie (Mrs.) Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Director of Accounting		Employer (See Instructions) Stellar Companies
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stell, Susie (Mrs.) Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Director of Accounting		Employer (See Instructions) Stellar Companies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/55 Rpt: 53/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strong, Jane <hr/> 6 Contributor address; City; State; Zip Code LUBBOCK, TX 79416	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumrall, Shirley (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79453	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumrall, Shirley (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79453	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweeten, Pamela <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79416	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) PBC
Date 04/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Judy <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	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: 50/55 Rpt: 54/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tepper, Carl (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79413	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) State Rep		9 Employer (See Instructions) State of Texas
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Denese (Mrs.) <hr/> Contributor address; City; State; Zip Code Ropesville, TX 79358	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thetford, Denese (Mrs.) <hr/> Contributor address; City; State; Zip Code Ropesville, TX 79358	Amount of Contribution (\$) \$20.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thornton, Sharon (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Touchstone, Flo (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	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: 51/55 Rpt: 55/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Nelda <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79413	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Nelda <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underwood, Cheryl (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underwood, Cheryl (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$41.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanOstrand, Adele (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	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: 52/55 Rpt: 56/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanOstrand, Adele (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79423	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vandevender, Kathy (Ms.) <hr/> Contributor address; City; State; Zip Code Shallowater, TX 79363	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vandevender, Kathy (Ms.) <hr/> Contributor address; City; State; Zip Code Shallowater, TX 79363	Amount of Contribution (\$) \$23.96
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanstory, Janet (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$20.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varela, Jamie (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/55 Rpt: 57/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 06/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Angela <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79413	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Real Estate Agent		9 Employer (See Instructions) Charles Schulz Realty
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Marianne <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79234	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitley, Laura <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$41.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Cindy (Ms.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79414	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Keller Williams
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jennifer (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) University Medical Center

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/55 Rpt: 58/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winn, Christopher (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79416	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) County Treasurer		9 Employer (See Instructions) Lubbock County
Date 01/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Vanessa <hr/> Contributor address; City; State; Zip Code Wolfforth, TX 79382	Amount of Contribution (\$) \$88.00
Principal occupation / Job title (See Instructions) AGConnect		Employer (See Instructions)
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Vanessa <hr/> Contributor address; City; State; Zip Code Wolfforth, TX 79382	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) AGConnect		Employer (See Instructions)
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Vanessa <hr/> Contributor address; City; State; Zip Code Wolfforth, TX 79382	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) AGConnect		Employer (See Instructions)
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Ashleigh (Mrs.) <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Wyatt Realty

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/55 Rpt: 59/99
2 FILER NAME Lubbock Area Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Ashleigh (Mrs.) 6 Contributor address; City; State; Zip Code Lubbock, TX 79423	7 Amount of Contribution (\$) \$45.10
8 Principal occupation / Job title (See Instructions) Real Estate Broker		9 Employer (See Instructions) Wyatt Realty
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wylie, Nell (Ms.) Contributor address; City; State; Zip Code Lubbock, TX 79416	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ysasaga, Virginia (Mrs.) Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zinnecker, Deborah (Mrs.) Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		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: 1/40 Rpt: 60/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/15/2025	5 Payee name Action Printing	
6 Amount (\$) \$138.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2407 82nd Lubbock, TX 79423	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fold Over Cards	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pink Elephant
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/06/2025	Candidate/Officeholder name Office sought Office held	
Payee name Action Printing		
Amount (\$) \$251.58 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2407 82nd Lubbock, TX 79423	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Fold Over Cards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/21/2025	Candidate/Officeholder name Office sought Office held	
Payee name Auction Frogs		
Amount (\$) \$995.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5555 N. Glenwood Street Boise, ID 86714	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Auction Software for Pink Elephant Gala
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: 2/40 Rpt: 61/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/27/2025	5 Payee name Citizens for Education Reform	
6 Amount (\$) \$336.63 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 684765 Austin, TX 78768	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Travel Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/12/2025	Candidate/Officeholder name Clark, Donita (Mrs.)	
Amount (\$) \$43.80 <input type="checkbox"/> Expenditure from corporate funds	Office sought 8102 Topeka Avenue Lubbock, TX 79424	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Postage Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/17/2025	Candidate/Officeholder name Clark, Donita (Mrs.)	
Amount (\$) \$43.80 <input type="checkbox"/> Expenditure from corporate funds	Office sought 8102 Topeka Avenue Lubbock, TX 79424	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Postage Reimbursement
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: 3/40 Rpt: 62/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/08/2025	5 Payee name Clark, Donita (Mrs.)	
6 Amount (\$) \$54.11 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8102 Topeka Avenue Lubbock, TX 79424	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Flowers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/06/2025	Candidate/Officeholder name Clark, Donita (Mrs.)	
Amount (\$) \$54.13 <input type="checkbox"/> Expenditure from corporate funds	Office sought 8102 Topeka Avenue Lubbock, TX 79424	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Flowers	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for caring and outreach flowers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/01/2025	Candidate/Officeholder name Clark, Donita (Mrs.)	
Amount (\$) \$62.53 <input type="checkbox"/> Expenditure from corporate funds	Office sought 8102 Topeka Avenue Lubbock, TX 79424	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Reimbursement for postage and sympathy cards	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for postage and sympathy cards
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: 4/40 Rpt: 63/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 06/11/2025	5 Payee name Corley, Jason	
6 Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 904 Broadway Lubbock, TX 79401	
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 Contribution to Jason Corley
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/11/2025	Payee name Cox, Lisa (Mrs.)	
Amount (\$) \$92.37 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O Box 1284 Shallowater, TX 79363	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Postage for Mailing Picture
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/11/2025	Payee name Dalby, Mike	
Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 904 Broadway Street Suite 101 Lubbock, TX 79401	
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 Contribution to Mike Dalby
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: 5/40 Rpt: 64/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/12/2025	5 Payee name Evite	
6 Amount (\$) \$266.49 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8800 W. Sunset Blvd. W. Hollywood, CA 90069	
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 Yearly Subscription
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 05/19/2025	Candidate/Officeholder name Office sought Office held	
Payee name FedEx		
Amount (\$) \$92.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4210 82nd St. Ste. 214 Lubbock, TX 79423	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Printing Yearbook Preliminary
Complete ONLY if direct expenditure to benefit C/OH		
Date 05/19/2025	Candidate/Officeholder name Office sought Office held	
Payee name FedEx		
Amount (\$) \$117.49 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4210 82nd St. Ste. 214 Lubbock, TX 79423	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Printing Yearbook Preliminary
Complete ONLY 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: 6/40 Rpt: 65/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/17/2025	5 Payee name Felton, Esther (Mrs.)	
6 Amount (\$) \$94.06 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1813 79th Place Lubbock, TX 79423	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Legislative Days
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/24/2025	Payee name GoDaddy	
Amount (\$) \$36.16 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2155 E GoDaddy Way Tempe, AZ 85284	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Marketing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/01/2025	Payee name Hasse, Shanda (Mrs.)	
Amount (\$) \$1,418.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3207 56th Lubbock, TX 79413	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Reimbursement for hotel
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: 7/40 Rpt: 66/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/12/2025	5 Payee name Hesse, Lisa	
6 Amount (\$) \$100.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3312 24th Street Lubbock, TX 79410	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Personal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/26/2025	Candidate/Officeholder name Office sought Office held	
Payee name Holiday Inn		
Amount (\$) \$128.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 701 East Stassney Lane Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Hours	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Training
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/26/2025	Candidate/Officeholder name Office sought Office held	
Payee name Holiday Inn		
Amount (\$) \$105.54 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 701 East Stassney Lane Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Hours	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Training
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: 8/40 Rpt: 67/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/26/2025	5 Payee name Holiday Inn	
6 Amount (\$) \$128.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 701 East Stassney Lane Austin, TX 78745	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Hours	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Training
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/26/2025	Candidate/Officeholder name Office sought Office held	
Payee name Holiday Inn		
Amount (\$) \$105.54 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 701 East Stassney Lane Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Hours	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Training
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/26/2025	Candidate/Officeholder name Office sought Office held	
Payee name Holiday Inn		
Amount (\$) \$125.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 701 East Stassney Lane Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Hours	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Training
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/26/2025	Candidate/Officeholder name Office sought Office held	
Payee name Holiday Inn		
Amount (\$) \$125.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 701 East Stassney Lane Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Hours	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Training
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: 9/40 Rpt: 68/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/26/2025	5 Payee name Holiday Inn	
6 Amount (\$) \$105.54 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 701 East Stassney Lane Austin, TX 78745	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Hours	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Training
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/26/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$125.55 <input type="checkbox"/> Expenditure from corporate funds	Payee name Holiday Inn Payee address; City; State; Zip Code 701 East Stassney Lane Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Hours	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Training
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/26/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$128.88 <input type="checkbox"/> Expenditure from corporate funds	Payee name Holiday Inn Payee address; City; State; Zip Code 701 East Stassney Lane Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Hours	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Training
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: 10/40 Rpt: 69/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/26/2025	5 Payee name Holiday Inn	
6 Amount (\$) \$105.54 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 701 East Stassney Lane Austin, TX 78745	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Hours	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Training
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/26/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$119.99 <input type="checkbox"/> Expenditure from corporate funds	Payee name Holiday Inn Payee address; City; State; Zip Code 701 East Stassney Lane Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Hours	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Training
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/17/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$20,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee name Hurst, Clay Payee address; City; State; Zip Code 3203 Jason Avenue Lubbock , TX 79407	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Gala Reimbursement 2024
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: 11/40 Rpt: 70/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 06/19/2025	5 Payee name Instapay Services LLC	
6 Amount (\$) \$2,200.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 15511 W. Highway 71 Austin, TX 78738	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Trump Impersonator
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/06/2025	Candidate/Officeholder name Office sought Office held	
Payee name LCRP		
Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2642 34th St. Lubbock, TX 79410	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Rent	(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
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/12/2025	Candidate/Officeholder name Office sought Office held	
Payee name LCRP		
Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2642 34th St. Lubbock, TX 79410	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Rent	(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
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: 12/40 Rpt: 71/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/04/2025	5 Payee name LCRP	
6 Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2642 34th St. Lubbock, TX 79410	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Rent	(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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/09/2025	Candidate/Officeholder name Office sought Office held	
Payee name LCRP		
Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2642 34th St. Lubbock, TX 79410	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Rent	(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
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/01/2025	Candidate/Officeholder name Office sought Office held	
Payee name LCRP		
Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2642 34th St. Lubbock, TX 79410	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Rent	(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
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: 13/40 Rpt: 72/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 05/15/2025	5 Payee name LCRP	
6 Amount (\$) \$4,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2642 34th St. Lubbock, TX 79410	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Black Tie and Boots Event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/10/2025	Candidate/Officeholder name Office sought Office held	
Payee name LCRP		
Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2642 34th St. Lubbock, TX 79410	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Rent	(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
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/16/2025	Candidate/Officeholder name Office sought Office held	
Payee name Lubbock Women's Club		
Amount (\$) \$1,136.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2020 Broadway Lubbock, TX 79401	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 General Meeting Meal
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: 14/40 Rpt: 73/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/20/2025	5 Payee name Lubbock Women's Club	
6 Amount (\$) \$920.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2020 Broadway Lubbock, TX 79401	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 General Meeting Meal
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/13/2025	Candidate/Officeholder name Payee name Lubbock Women's Club	
Amount (\$) \$703.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2020 Broadway Lubbock, TX 79401	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 General Meeting Meal
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/17/2025	Candidate/Officeholder name Payee name Lubbock Women's Club	
Amount (\$) \$765.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2020 Broadway Lubbock, TX 79401	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 General Meeting Meal
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: 15/40 Rpt: 74/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/27/2025	5 Payee name Lubbock Women's Club	
6 Amount (\$) \$220.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2020 Broadway Lubbock, TX 79401	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Dues	(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 Dues
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2025	Payee name Lubbock Women's Club	
Amount (\$) \$926.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2020 Broadway Lubbock, TX 79401	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Luncheon Meals
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/19/2025	Payee name Lubbock Women's Club	
Amount (\$) \$648.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2020 Broadway Lubbock, TX 79401	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Luncheon Meals
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: 16/40 Rpt: 75/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/06/2025	5 Payee name Operation Hope	
6 Amount (\$) \$12,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1120 W Loop 289 Lubbock, TX 79416	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Operation Hope Fundraiser Gala
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/16/2025	Candidate/Officeholder name Office sought Office held	
Payee name Overton Hotel		
Amount (\$) \$4,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2322 Mac Davis Lane Lubbock, TX 79401	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Deposit on Venue
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/24/2025	Candidate/Officeholder name Office sought Office held	
Payee name Peoples Bank		
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5820 82nd St Lubbock, TX 79424	
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 Return Item
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: 17/40 Rpt: 76/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/24/2025	5 Payee name Peoples Bank	
6 Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5820 82nd St Lubbock, TX 79424	
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 Return Item
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/06/2025	Candidate/Officeholder name Office sought Office held	
Payee name Peoples Bank		
Amount (\$) \$84.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5820 82nd St Lubbock, TX 79424	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Check ReOrder
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/14/2025	Candidate/Officeholder name Office sought Office held	
Payee name Premier Speckers Bureau		
Amount (\$) \$30,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 109 International Drive Suite 300 Franklin, TX 37067	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Pink Elephant Speaker Deposit
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: 18/40 Rpt: 77/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/02/2025	5 Payee name Quickbooks	
6 Amount (\$) \$105.53 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2700 Coast Ave. Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Intuit Purchase
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/04/2025	Candidate/Officeholder name Office sought Office held	
Payee name Quickbooks		
Amount (\$) \$105.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2700 Coast Ave. Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Intuit Purchase
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Quickbooks		
Amount (\$) \$105.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2700 Coast Ave. Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Intuit Purchase
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: 19/40 Rpt: 78/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/02/2025	5 Payee name Quickbooks	
6 Amount (\$) \$105.53 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2700 Coast Ave. Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Intuit Purchase
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/05/2025	Candidate/Officeholder name Office sought Office held	
Payee name Quickbooks		
Amount (\$) \$105.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2700 Coast Ave. Mountain View, CA 94043	
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 Intuit Purchase
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Quickbooks		
Amount (\$) \$105.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2700 Coast Ave. Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
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: 20/40 Rpt: 79/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 06/11/2025	5 Payee name Rackler, Jordan	
6 Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 904 Broadway Street Suite 101 Lubbock, TX 79401	
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 Contribution to Jordan Rackler
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/12/2025	Candidate/Officeholder name Office sought Office held	
Payee name Ragland, Melanie (Ms.)		
Amount (\$) \$94.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2121 70th Street Lubbock, TX 79412	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Legislative Days
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/12/2025	Candidate/Officeholder name Office sought Office held	
Payee name Reed, Grace		
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2500 Broadway Lubbock, TX 79409	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Scholarship	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Scholarship Gift
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: 21/40 Rpt: 80/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 06/02/2025	5 Payee name Sivadge, Vanessa	
6 Amount (\$) \$545.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5900 Balcones Dr Suite 100 Austin, TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Speaker 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 Cancelled Travel Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/06/2025	Payee name Smith, Blake	
Amount (\$) \$1,950.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5805 64th Street Lubbock, TX 79424	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2024 Tax Return Prep
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/21/2025	Payee name Squarespace	
Amount (\$) \$294.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Marketing
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: 22/40 Rpt: 81/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/06/2025	5 Payee name Squarespace	
6 Amount (\$) \$4.17 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/30/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$9.00 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/17/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$12.44 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
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: 23/40 Rpt: 82/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/21/2025	5 Payee name Squarespace	
6 Amount (\$) \$6.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/22/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$3.20 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/27/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1.32 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
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: 24/40 Rpt: 83/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/28/2025	5 Payee name Squarespace	
6 Amount (\$) \$5.84 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/29/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$2.06 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/03/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$3.67 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
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: 25/40 Rpt: 84/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/04/2025	5 Payee name Squarespace	
6 Amount (\$) \$4.52 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/05/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$3.20 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/06/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1.32 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
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: 26/40 Rpt: 85/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/07/2025	5 Payee name Squarespace	
6 Amount (\$) \$1.32 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/10/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$2.35 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/13/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$4.52 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
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: 27/40 Rpt: 86/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/14/2025	5 Payee name Squarespace	
6 Amount (\$) \$1.32 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/21/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$15.30 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/24/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$2.20 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
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: 28/40 Rpt: 87/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 02/28/2025	5 Payee name Squarespace	
6 Amount (\$) \$4.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
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 Squarespace		
Amount (\$) \$3.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Squarespace		
Amount (\$) \$1.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Squarespace		
Amount (\$) \$1.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
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: 29/40 Rpt: 88/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/06/2025	5 Payee name Squarespace	
6 Amount (\$) \$3.34 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/07/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$4.66 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/10/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$3.34 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
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: 30/40 Rpt: 89/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/13/2025	5 Payee name Squarespace	
6 Amount (\$) \$1.32 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/14/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$9.31 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/17/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$4.87 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
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: 31/40 Rpt: 90/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 03/25/2025	5 Payee name Squarespace	
6 Amount (\$) \$1.32 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/25/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1.32 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/31/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$6.39 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
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: 32/40 Rpt: 91/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/01/2025	5 Payee name Squarespace	
6 Amount (\$) \$2.99 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/07/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$3.34 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/14/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$6.81 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
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: 33/40 Rpt: 92/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/15/2025	5 Payee name Squarespace	
6 Amount (\$) \$7.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/18/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$6.70 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/21/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1.32 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Processing Fees
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: 34/40 Rpt: 93/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 05/08/2025	5 Payee name Squarespace	
6 Amount (\$) \$11.93 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/12/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$7.98 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/15/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$6.21 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Card Processing Fees
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: 35/40 Rpt: 94/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 06/11/2025	5 Payee name Squarespace	
6 Amount (\$) \$2.78 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Card Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/15/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$2.78 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Card Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/16/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$5.56 <input type="checkbox"/> Expenditure from corporate funds	Payee name Squarespace Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Card Processing Fee
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: 36/40 Rpt: 95/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 06/19/2025	5 Payee name Squarespace	
6 Amount (\$) \$3.68 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 451 Broadway FL 2 New York, NY 10013	
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 Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/06/2025	Candidate/Officeholder name TFRW	
Amount (\$) \$2,025.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13740 US-183 J4 Austin, TX 78750	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Membership Dues	(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		
Date 02/28/2025	Candidate/Officeholder name TFRW	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13740 US-183 J4 Austin, TX 78750	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Membership Dues	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 40 New Members
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: 37/40 Rpt: 96/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/30/2025	5 Payee name TFRW	
6 Amount (\$) \$425.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13740 US-183 J4 Austin, TX 78750	
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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/01/2025	Candidate/Officeholder name Office sought Office held	
Payee name TFRW		
Amount (\$) \$1,450.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13740 US-183 J4 Austin, TX 78750	
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		
Date 06/24/2025	Candidate/Officeholder name Office sought Office held	
Payee name TFRW		
Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13740 US-183 J4 Austin, TX 78750	
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		

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: 38/40 Rpt: 97/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/15/2025	5 Payee name USPS	
6 Amount (\$) \$182.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5014 Gary Ave. Lubbock, TX 79423	
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 PO Box
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/13/2025	Payee name Wix	
Amount (\$) \$1,805.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 100 Gansevoort St. New York, NY 10014-1477	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/12/2025	Payee name Wix	
Amount (\$) \$441.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 100 Gansevoort St. New York, NY 10014-1477	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Marketing
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: 39/40 Rpt: 98/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 01/16/2025	5 Payee name Woodshed Gifts	
6 Amount (\$) \$414.06 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6405 Indiana Avenue Lubbock, TX 79413	
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 Name Badges
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/06/2025	Candidate/Officeholder name Office sought Office held	
Payee name Woodshed Gifts		
Amount (\$) \$243.56 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6405 Indiana Avenue Lubbock, TX 79413	
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 Name Badges
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/16/2025	Candidate/Officeholder name Office sought Office held	
Payee name Woodshed Gifts		
Amount (\$) \$40.59 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6405 Indiana Avenue Lubbock, TX 79413	
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 Name Badges
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: 40/40 Rpt: 99/99	2 FILER NAME Lubbock Area Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00029579
4 Date 04/16/2025	5 Payee name Woodshed Gifts	
6 Amount (\$) \$81.19 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6405 Indiana Avenue Lubbock, TX 79413	
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 Name Badges
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held