

**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 Filings
00016966

2 Total pages filed:

3 COMMITTEE NAME

Fort Worth Republican Women PAC

OFFICE USE ONLY

Date Received

RECEIVED

7/16/25

Texas Ethics Commission

via email

4 COMMITTEE
ADDRESS

ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE

☒ Change of Address

**PO Box 101613
Fort Worth, TX 76185**

Date Hand-delivered or Date Postmarked

5 CAMPAIGN
TREASURER
NAME

MS MRS / MR FIRST MI

Dr. Stephanie M

NICKNAME LAST SUFFIX

N/A Janiak

Receipt # Amount \$

Date Processed **7/16/25**

Date Imaged

6 CAMPAIGN
TREASURER
STREET ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE

10408 Halter Dr. Fort Worth, TX 76126

7 CAMPAIGN
TREASURER
MAILING ADDRESS

STREET ADDRESS OR PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE

☒ Change of Address

PO Box 101613 Fort Worth, TX 76185

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION

(214) 679-1911

9 REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Dissolution Report (Attach PAC-DR)

☒ July 15

☐ 8th day before election

☐ 10th day after campaign treasurer
termination

☐ Runoff

10 PERIOD
COVERED

Month Day Year

01/01/2025

THROUGH

Month Day Year

07/01/2025

11 ELECTION

ELECTION DATE

Month Day Year

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other

☐ General

☐ Special

Description _____

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE PURPOSE AND TOTALS

FORM GPAC
COVER SHEET PG 2

12 COMMITTEE NAME Fort Worth Republican Women PAC		13 Filer ID (Ethics Commission Filers) 00016966
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 N/A
		B. Opposed N/A
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported N/A
		B. Opposed N/A
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	N/A
15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> Check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 15.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 15.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 SIGNATURE 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.

Signature of Campaign Treasurer (Declarant)

Please complete either option below:

(1) Affidavit

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

OR

(2) Unsworn Declaration

My name is Stephanie M. Janiak and my date of birth is

My address is 10408 Halter Dr. Fort Worth, TX 76126
(street) (city) (state) (zip code) (country)

Executed in Tarrant County, State of Texas, on the 14 day of July, 2025
(month) (year)

Signature of Campaign Treasurer (Declarant)

SUBTOTALS - GPAC**FORM GPAC
COVER SHEET PG 3**

17 COMMITTEE NAME Fort Worth Republican Women PAC		18 Filer ID (Ethics Commission Filers) 00016966
19 SCHEDULE SUBTOTALS	NAME OF SCHEDULE	SUBTOTAL AMOUNT
for, <input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 17975
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 MADE FROM POLITICAL CONTRIBUTIONS	\$ 15.00
11. <input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12. <input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
13. <input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14. <input checked="" type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 27187.50
15. <input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 13
2 FILER NAME Fort Worth Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
4 Date 2/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brian Walker	7 Amount of contribution (\$) 375.00
6 Contributor address: City: State: Zip Code unknown		
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 3/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mary Tom Curnutt	Amount of contribution (\$) 225.00
Contributor address: City: State: Zip Code unknown		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Tarrant County
Date 3/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Randi Hardin	Amount of contribution (\$) 375.00
Contributor address: City: State: Zip Code unknown		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 3/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Deborah Nekhom	Amount of contribution (\$) 375.00
Contributor address: City: State: Zip Code unknown		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Fort Worth Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
4 Date 4/1/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alexander Kim	7 Amount of contribution (\$) 375.00
6 Contributor address: City: State: Zip Code		
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 4/2/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brett Busby	Amount of contribution (\$) 375.00
Contributor address: City: State: Zip Code unknown		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 4/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Amy Allin	Amount of contribution (\$) 425.00
Contributor address: City: State: Zip Code unknown		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 4/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ryan Hill	Amount of contribution (\$) 425.00
Contributor address: City: State: Zip Code unknown		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1.
2 FILER NAME Fort Worth Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
4 Date 4/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lee Sorrells	7 Amount of contribution (\$) 400.00
6 Contributor address: City: State: Zip Code unknown		
8 Principal occupation / Job title (See Instructions) District Attorney		9 Employer (See Instructions) Tarrant County
Date 4/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James Wagner	Amount of contribution (\$) 400.00
Contributor address: City: State: Zip Code unknown		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/5/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Douglas Allen	Amount of contribution (\$) 375.00
Contributor address: City: State: Zip Code unknown		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 5/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christopher Taylor	Amount of contribution (\$) 600.00
Contributor address: City: State: Zip Code unknown		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1.
2 FILER NAME Fort Worth Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
4 Date 3/5/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) William Brandt	7 Amount of contribution (\$) 225.00
6 Contributor address: _____ City: _____ State: _____ Zip Code _____ [REDACTED]		
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Tarrant County
Date 4/9/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crhistopher Gregory	Amount of contribution (\$) 275.00
Contributor address: _____ City: _____ State: _____ Zip Code _____ [REDACTED]		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Tarrant County
Date 3/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David Cook	Amount of contribution (\$) 375.00
Contributor address: _____ City: _____ State: _____ Zip Code _____ unknown		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 3/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James Mumford	Amount of contribution (\$) 375.00
Contributor address: _____ City: _____ State: _____ Zip Code _____ [REDACTED]		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1.
2 FILER NAME Fort Worth Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
4 Date 3/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kevin Yeary 6 Contributor address: City: State: Zip Code unknown	7 Amount of contribution (\$) 375.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 4/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jimmy Blacklock Blaylock Contributor address: City: State: Zip Code unknown	Amount of contribution (\$) 425.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Norma Bazan Contributor address: City: State: Zip Code [REDACTED] River Oaks, TX 76114	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
Date 5/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Katherin Allen Contributor address: City: State: Zip Code [REDACTED] Euless, TX 76039	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Fort Worth Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
4 Date 5/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dusty Filmore	7 Amount of contribution (\$) 500.00
6 Contributor address: _____ City: _____ State: _____ Zip Code _____ [REDACTED] Fort Worth, TX 76102		
8 Principal occupation / Job title (See Instructions) unknown		9 Employer (See Instructions) unknown
Date 6/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leslie Barrows	Amount of contribution (\$) 500.00
Contributor address: _____ City: _____ State: _____ Zip Code _____ [REDACTED] Sotuhlake, TX 76092		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 6/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bert Richardson	Amount of contribution (\$) 500
Contributor address: _____ City: _____ State: _____ Zip Code _____ [REDACTED]		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) unknown
Date 6/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trent Loftin	Amount of contribution (\$) 375.00
Contributor address: _____ City: _____ State: _____ Zip Code _____ [REDACTED]		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Fort Worth Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
4 Date 6/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charles Vanover 6 Contributor address: _____ City: _____ State: _____ Zip Code: _____ [REDACTED]	7 Amount of contribution (\$) 375.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 6/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bradley Clark Contributor address: _____ City: _____ State: _____ Zip Code: _____ [REDACTED]	Amount of contribution (\$) 375.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 6/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brian Bolton Contributor address: _____ City: _____ State: _____ Zip Code: _____ [REDACTED]	Amount of contribution (\$) 375.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 6/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cynthia Favila-Terry Contributor address: _____ City: _____ State: _____ Zip Code: _____ [REDACTED]	Amount of contribution (\$) 375.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1.
2 FILER NAME Fort Worth Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
4 Date 06/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) William Anthony Porter	7 Amount of contribution (\$) 375.00
6 Contributor address: _____ City: _____ State: _____ Zip Code _____ [REDACTED]		
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 6/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) An Hsu	Amount of contribution (\$) 375.00
Contributor address: _____ City: _____ State: _____ Zip Code _____ [REDACTED] Bedford TX 76021		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 4/1/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brooke Allen	Amount of contribution (\$) 375.00
Contributor address: _____ City: _____ State: _____ Zip Code _____ [REDACTED]		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 4/1/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John P. Chupp	Amount of contribution (\$) 375.00
Contributor address: _____ City: _____ State: _____ Zip Code _____ unknown		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1.
2 FILER NAME Fort Worth Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
4 Date 4/1/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kenneth E. Newell	7 Amount of contribution (\$) 375.00
6 Contributor address: City: State: Zip Code unknown		
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 4/1/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Don Pierson	Amount of contribution (\$) 375.00
Contributor address: City: State: Zip Code unknown		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 4/1/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jennifer Rymell	Amount of contribution (\$) 375.00
Contributor address: City: State: Zip Code [REDACTED]		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 4/1/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eric Starnes	Amount of contribution (\$) 375.00
Contributor address: City: State: Zip Code unknown		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Fort Worth Republican Women PAC		3 Filer ID: (Ethics Commission Filers) 00016966
4 Date 1/7/2025	5 Full name of contributor Debbie Adame <input type="checkbox"/> out-of-state PAC (ID# _____) 6 Contributor address: _____ City: _____ State: _____ Zip Code: _____ Fort Worth Texas 76102	7 Amount of contribution (\$) 100
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 1/13/2025	Full name of contributor Carey Walker <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address: _____ City: _____ State: _____ Zip Code: _____ _____	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 1/20/2025	Full name of contributor Kathryn Pompa <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address: _____ City: _____ State: _____ Zip Code: _____ _____ Fort Worth Texas 76109	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
Date 2/16/2025	Full name of contributor Allison Byrd <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address: _____ City: _____ State: _____ Zip Code: _____ _____ Fort Worth Texas 76132	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Fort Worth Republican Women PAC

3 Filer ID (Ethics Commission Filers)
00016966

4 Date

2/17/2025

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Cary Cheshire

6 Contributor address:

City:

State:

Zip Code

Benbrook Texas 76116

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

unknown

9 Employer (See Instructions)

unknown

Date

2/18/2025

Full name of contributor

☐ out-of-state PAC (ID# _____)

Veronica Law

Contributor address:

City:

State:

Zip Code

Fort Worth Texas 76116

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

unknown

Employer (See Instructions)

unknown

Date

2/24/2025

Full name of contributor

☐ out-of-state PAC (ID# _____)

Diane Kessler

Contributor address:

City:

State:

Zip Code

Fort Worth, TX Texas 76114

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

unknown

Employer (See Instructions)

unknown

Date

2/26/2025

Full name of contributor

☐ out-of-state PAC (ID# _____)

Dusty Fillmore

Contributor address:

City:

State:

Zip Code

Fort Worth Texas 76102

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

unknown

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Fort Worth Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
4 Date 2/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) William Knight	7 Amount of contribution (\$) 100.00
6 Contributor address: City: State: Zip Code [REDACTED] Fort Worth Texas 76196		
8 Principal occupation / Job title (See Instructions) unknown		9 Employer (See Instructions) unknown
Date 2/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mary Frances Wood	Amount of contribution (\$) 100.00
Contributor address: City: State: Zip Code [REDACTED] Fort Worth Texas 76121		
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
Date 3/2/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jennifer Rymell	Amount of contribution (\$) 100.00
Contributor address: City: State: Zip Code [REDACTED]		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 3/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Randi Hartin	Amount of contribution (\$) 130.00
Contributor address: City: State: Zip Code [REDACTED]		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Fort Worth Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
4 Date 3/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pamela Fernandez	7 Amount of contribution (\$) 130.00
6 Contributor address: City: State: Zip Code [REDACTED] Fort Worth Texas 76137		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 3/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ALAN BLAYLOCK	Amount of contribution (\$) 100.00
Contributor address: City: State: Zip Code [REDACTED]		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 3/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Julie Lugo	Amount of contribution (\$) 100.00
Contributor address: City: State: Zip Code [REDACTED]		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 3/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leslie S Barrows	Amount of contribution (\$) 130.00
Contributor address: City: State: Zip Code [REDACTED] Southlake Texas 76092		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Barrows Law Firm
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1.
2 FILER NAME Fort Worth Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
4 Date 4/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Norma Bazan	7 Amount of contribution (\$) 130.00
6 Contributor address: _____ City: _____ State: _____ Zip Code _____ [REDACTED] River Oaks Texas 76114		
8 Principal occupation / Job title (See Instructions) assistant district attorney		9 Employer (See Instructions) Tarrant County
Date 5/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Melanie Tatum	Amount of contribution (\$) 100.00
Contributor address: _____ City: _____ State: _____ Zip Code _____ [REDACTED] Ft Worth Texas 76107		
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
Date 5/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) sayeda bilqees syed	Amount of contribution (\$) 130.00
Contributor address: _____ City: _____ State: _____ Zip Code _____ [REDACTED] Colleyville Texas 76034		
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
Date 5/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Connie Blake	Amount of contribution (\$) 100.00
Contributor address: _____ City: _____ State: _____ Zip Code _____ [REDACTED] Fort Worth Texas 76110		
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Fort Worth Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
4 Date 6/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) JOHN WHITE 6 Contributor address: _____ City: _____ State: _____ Zip Code: _____ [REDACTED] ARLINGTON Texas 76016	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) unknown
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alexia Tuttle Contributor address: _____ City: _____ State: _____ Zip Code: _____ [REDACTED] Haslet Texas 76052	Amount of contribution (\$) 130.00
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions) Tuttle Equity, Tuttle Nutrition
Date 6/2/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Debbie Adame Contributor address: _____ City: _____ State: _____ Zip Code: _____ [REDACTED] Arlington, TX 76017	Amount of contribution (\$) 400.0
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address: _____ City: _____ State: _____ Zip Code: _____	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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/Maintenance
Office Overhead/Rental 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: 1	2 FILER NAME Fort Worth Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00016966
4 Date 1/17/2025	5 Payee name Frost Bank	
6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City: State: Zip Code 5651 Bryant Irvin Road, Fort Worth, TX 76132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) fees	(b) Description bank fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 2/19/2025	Payee name Frost Bank	
Amount (\$) <input type="checkbox"/> Expenditure from corporate funds	Payee address; City: State: Zip Code 5651 Bryant Irvin Road, Fort Worth, TX 76132	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) fees	Description bank fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 3/18/2025	Payee name Frost Bank	
Amount (\$) <input type="checkbox"/> Expenditure from corporate funds	Payee address; City: State: Zip Code 5651 Bryant Irvin Road, Fort Worth, TX 76132	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) fees	Description bank fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule I: 3	2 FILER NAME Fort Worth Republicafn Women PAC		3 Filer ID (Ethics Commission Filers) 00016966	
4 Date 1/2/2025	5 Payee name River Crest Country Club			
6 Amount (\$) 14,503.36 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address: 1501 Western Ave, Fort Worth, TX 76107		City	State Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.) Event Expense		(b) Description (See instructions regarding type of information required.) Christmas Membership Lucheon	
Date 1/7/2025	Payee name MULHOLLAND CUSTOM			
Amount (\$) 43.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address: 1200 W Berry St Ste B, Fort Worth, TX, United States		City	State Zip Code
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Printing expense		Description (See instructions regarding type of information required.) Membership name tags	
Date 1/31/2025	Payee name Bluehost			
Amount (\$) 21.17 <input type="checkbox"/> Expenditure from corporate funds	Payee address: 1958 S 950 E, Provo, UT, United States		City	State Zip Code
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Advertising expense		Description (See instructions regarding type of information required.) website hosting	
Date 3/10/2025	Payee name Kruczynski Consulting			
Amount (\$) 594.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address: 1529 Lincoln St, Longmont CO 80501		City	State Zip Code
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Advertising expense		Description (See instructions regarding type of information required.) Webmaster	

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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: 3	2 FILER NAME Fort Worth Republicafn Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
4 Date 3/31/2025	5 Payee name Citi Club of Fort Worth		
6 Amount (\$) 5736.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address: City State Zip Code 301 Commerce St, Fort Worth, TX 76102		
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.) Event Expense	(b) Description (See instructions regarding type of information required.) Monthly Membership luncheon	
Date 3/31/2025	Payee name Citi Club of Fort Worth		
Amount (\$) 873.73 <input type="checkbox"/> Expenditure from corporate funds	Payee address: City State Zip Code 301 Commerce St, Fort Worth, TX 76102		
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Event Expense	Description (See instructions regarding type of information required.) Monthly Membership luncheon	
Date 4/7/2025	Payee name Patricia Burns		
Amount (\$) 35.15 <input type="checkbox"/> Expenditure from corporate funds	Payee address: City State Zip Code 10620 Bluestone Rd. Fort Worth, Tx 76108		
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Printing expense	Description (See instructions regarding type of information required.) Printing labels for Dictionary Project	
Date 6/3/2025	Payee name MULHOLLAND CUSTOM		
Amount (\$) 95.26 <input type="checkbox"/> Expenditure from corporate funds	Payee address: City State Zip Code 1200 W Berry St Ste B, Fort Worth, TX, United States		
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Printing expense	Description (See instructions regarding type of information required.) Membership name tags	
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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I 3	2 FILER NAME Fort Worth Republicafn Women PAC		3 Filer ID (Ethics Commission Filers) 00016966	
4 Date 6/17/2025	5 Payee name Citi Club of Fort Worth			
6 Amount (\$) 4795.71 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address 301 Commerce St, Fort Worth, TX 76102		City	State Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.) Event Expense		(b) Description (See instructions regarding type of information required.) Monthly Membership luncheon	
Date 6/17/2025	Payee name Fort Worth Republicafn Women PAC			
Amount (\$) 491.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address: 301 Commerce St, Fort Worth, TX 76102		City	State Zip Code
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Event Expense		Description (See instructions regarding type of information required.) Monthly Membership luncheon	
Date	Payee name			
Amount (\$) <input type="checkbox"/> Expenditure from corporate funds	Payee address:		City	State Zip Code
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)		Description (See instructions regarding type of information required.)	
Date	Payee name			
Amount (\$) <input type="checkbox"/> Expenditure from corporate funds	Payee address:		City	State Zip Code
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)		Description (See instructions regarding type of information required.)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



AFFIDAVIT FOR COMMITTEE: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2025, a campaign treasurer of a political committee that has accepted more than \$33,910 in political contributions or made more than \$33,910 in political expenditures in any calendar year must file all subsequent reports electronically.

Filer name Fort Worth Republicafn Women PAC	Filer ID # 00016966
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OFFICE USE ONLY RECEIVED 7/16/25 Texas Ethics Commission	
Date Hand delivered or Date Postmarked via email	
Receipt #	Amount \$
Date Processed 7/16/25	
Date Imaged	

1. I swear or affirm that the political committee of which I am the campaign treasurer has not accepted more than \$33,910 in political contributions or made more than \$33,910 in political expenditures in a calendar year.
2. I further swear or affirm that the political committee of which I am the campaign treasurer does not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to the committee.
3. I further swear or affirm that no person acting as the committee's agent or consultant, and no person with whom the committee contracts, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to the committee.
4. I further swear or affirm that I understand that I am required to file the committee's campaign finance reports electronically if the committee, the committee's agent or consultant, or a person with whom the committee contracts exceeds \$33,910 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to the committee.
5. I am filing this affidavit with the GPAC report due on July 15, 2025. I understand that this affidavit is required to be filed with each campaign finance report for which the committee is claiming an exemption from electronic filing.

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

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

Signature of Campaign Treasurer

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

(2) Unsworn Declaration

My name is Stephanie janiak, and my date of birth is [REDACTED].

My address is 10408 Halter Dr. Fort Worth, TX 76126
(street) (city) (state) (zip code) (country)

Executed in Tarrant County, State of Texas, on the 14 day of July, 202025
(month) (year)

Signature of Campaign Treasurer (Declarant)

**FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT
ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER**