	PURPOSE COMMITTE	E	FORM GPAC COVER SHEET PG 1
The GPAC Instruction Gu	ide explains how to complete this form.	1 Filter ID (Ethics Commission Filters 00016966	2 Total pages filed:
3 COMMITTEE NAME		A transfer of the control of the con	OFFICE USE ONLY
Fort World	th Republican Wome	n PAC	Date Received
4 COMMITTEE ADDRESS	ADDRESS . PO BOX: APT / SUITE #: CI	TY: STATE: ZP CODE	RECEIVED
Change of Address	PO Box 101613		7/16/25
	Fort Wort, TX 76	6185	Texas Ethics Commission
5 CAMPAIGN TREASURER NAME	Dr. Stephanie M	MI	Date Handstefforged of Date Postmarked Via Cmail  Receipt # Amount \$
	NICKNAME LAST	Date Processed 7/16/25	
	N/A Janiak		Date Imaged
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUIT	TE#: CITY: STATE;	ZIP CODE
(residence of business)	10408 Halter Dr. Fort W	orth, TX 76126	
7 CAMPAIGN TREASURER MAILING ADDRESS  Change of Address	PO Box 101613 Fort Wo	t, grunde (Krytskille) Historia	ZIP CODE
B CAMPAIGN TREASURER PHONE	( 214 ) 679-1911	EXTENSION	76 - A - T - B - T
REPORT TYPE	July 15	th day before election	Dissolution Report (Attach PAC-DR)  10th day after compaign treasurer termination
0 PERIOD COVERED	Month Day Year		Month Day Year
	01/01/2025	THROUGH	07/01/2025
1 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year Primary General		Pescription
	GO TO PA	AGE 2	

# GENERAL-PURPOSE COMMITTEE PURPOSE AND TOTALS

## FORM GPAC COVER SHEET PG 2

Fort Worth R	epublican Women PA		13 Filer ID (Éthics Commission Filers) 00016966	
14 COMMITTEE	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if	N/A		
(Attach lists on plain	applicable, classify by party.)	B. Opposed		
paper to complete this		N/A		
report if necessary.)	2. Measures	A. Supported		
	(Describe by date and	N/A		
	location of election and	B. Opposed		
	nature of issue.)	N/A		
	3. Officeholders Assisted	MARK TO 1. 1995		
	(Identify by name or, if	N/A		
	applicable, classify by party.)			
15 CONTRIBUTION	1. TOTAL UNITEMIZED F	OLITICAL CONTRIBUTIONS (OTHER THAN		
TOTALS	PLEDGES, LOANS, OF	R GUARANTEES OF LOANS, OR	1 <b>S</b>	
	CONTRIBUTIONS MAI	DE ELECTRONICALLY)	0.00	
	Check here if this repo	ort qualifies for the higher itemization thres	hold	
	2. TOTAL POLITICAL	CONTRIBUTIONS	•	
	OTHER THAN PLEDG	ES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00	
EXPENDITURE	3. TOTAL UNITEMIZED F	OLITICAL EXPENDITURES		
TOTALS	5 1		<sup>\$</sup> 15.00	
		VACUALITIES		
	4. TOTAL POLITICAL E	XPENDITURES	\$15.00	
CONTRIBUTION	5. TOTAL POLITICAL CO	NTRIBUTIONS MAINTAINED AS OF THE LAS		
BALANCE	OF THE REPORTING		\$0.00	
OUTSTANDING	6. TOTAL PRINCIPAL AM	OUNT OF ALL OUTSTANDING LOANS AS O	E THE	
LOAN TOTALS	LAST DAY OF THE RE		\$0.00	
		alty of perjury, that the accompanyin red to be reported by me under Title 1		
		Signature of Campaig	n Treasurer (Declarant)	
	Diagona	amplete either ention below:		
	Please Co	omplete either option below:		
(1) Affidavit				
AFFIX NOTARY STAMP	SEALABOVE			
Sworn to and subscrib	ned before me, by the said		, this the	
day of	, 20, to certify whi	ch, witness my hand and seal of office	<b>3.</b>	
Signature of officer adm	inistering oath Printed n	ame of officer administering oath	Title of officer administering oath	
		OR	A Service of the Control of the Cont	
(2) Unsworn Declarati	ion			
My name is Stephan	ie M. Janiak	and my date of birth is		
		and thy date of but is	*	
My address is10408 H	(street)		(zip code) (country)	
My address is10408 H	(street)	exas on the 14 day of Jul	20 25	
My address is10408 H	lalter Dr. Fort Worth, TX 76126 (street) County, State ofTe	exas on the 14 day of Jul		
My address is 10408 H	(street)	exas on the 14 day of Jul	20 25	

## SUBTOTALS - GPAC

## FORM GPAC COVER SHEET PG 3

17	COMMITTEE NAME	18 Filer ID (Ethios Co	mmission Filers)			
	Fort Worth Republican Women PAC	00016966				
19	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL			
or,	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	NAC THE A	\$17975			
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTION	s	\$			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS					
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OF	R LABOR ORGANIZATION	\$			
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CO	DRPORATION OR LABOR	\$			
6.	SCHEDULE C3 MONETARY SUPPORT FROM CORPORATION OR LABO	RORGANIZATION	\$			
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION					
8.	SCHEDULE D. PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION					
9.	SCHEDULE E: LOANS					
10.	0. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS					
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS					
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	L CONTRIBUTIONS	\$			
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL C	Transporter or rest	\$ 27187.50			
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTO FILER	UTIONS RETURNED	\$			
125	2025					

### SCHEDULE A1

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

Th	e Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1;
2 FILER NAMI	epublican Women PAC	40 Workship to contain in force of the control of t	3 Filer ID (Ethics Commission Filers 00016966
4 Date 2/21/2025	5 Full name of contributor	e PAC (ID#	7 Amount of contribution (\$)
	6 Contributor address: City,	State; Zip Code	
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instru	uctions)
Judge		State of Texas	
Date 3/13/2025	Full name of contributor	e PAC (ID#	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	225.00
Principal occi	ipation / Job title (See Instructions)	Employer (See Instru	oftions)
Judge	penery out the (occ manucions)	Tarrant County	cuors)
Date 3/19/2025	Full name of contributor		Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	375.00
	upation / Job title (See Instructions)	Employer (See Instru	ctions)
Judge		State of Texas	
Date 3/25/2025	Full name of contributor	e PAC (ID#)	Amount of contribution (\$)  375.00
		State; Zip Code	
	unknown		
Principal occu Judge	ipation / Job title (See Instructions)	State of Texas	ctions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## SCHEDULE A1

Th	e Instruction Guide explains how	to complete this	s form.	1 Total pages Schedule A1:
2 FILER NAME Fort Worth F	Republican Women PAC			3 Filer ID (Ethics Commission Filers 00016966
4 Date 4/1/2025	5 Full name of contributor Alexander Kim	out-of-state PA	C (ID#)	7 Amount of contribution (\$) 375.00
	6 Contributor address:	City;	State; Zip Code	
Principal occ Judge	upation / Job title (See Instructions)		9 Employer (See Instruc State of Texas	tions)
Date 4/2/2025	Full name of contributor Brett Busby	out-of-state PAC	C (IO#:	Amount of contribution (\$) 375.00
	Contributor address:	City;	State; Zip Code	
Principal occur Judge	pation / Job title (See Instructions)		Employer (See Instruct  State of Texas	ions)
Date 4/10/2025	Full name of contributor  Amy Allin  Contributor address;  unknown	100 %	State: Zip Code	Amount of contribution (\$) 425.00
Principal occu Judge	pation / Job title (See Instructions)		Employer (See Instruction State of Texas	ions)
Date 4/15/2025	Full name of contributor  Ryan Hill  Contributor address:  unknown	out-of-state PAC	State; Zip Code	Amount of contribution (\$) 425.00
Principal occup Judge	pation / Job title (See Instructions)		Employer (See Instruction State of Texas	ons)

## SCHEDULE A1

Th	e Instruction Guide explains how	to complete thi	s form.	1 Total pages Schedule A1:
Fort Worth	Republican Women PAC			3 Filer ID (Ethics Commission Filers 00016966
Date 1/28/2025	5 Full name of contributor		7 Amount of contribution (\$) 400.00	
	6 Contributor address: unknown	City:	State: Zip Code	
Principal occ District Att	cupation / Job title (See Instructions)		9 Employer (See Instruct Tarrant County	5
Date /29/2025	Full name of contributor  James Wagner	out-of-state PAC (ID#)  City; State; Zip Code		Amount of contribution (\$) 400.00
	Contributor address: unknown			
Principal occi	upation / Job title (See Instructions)		Employer (See Instructi	ions)
Date	Full name of contributor	Dut-of-state PA	C (ID#:)	Amount of contribution (\$)
5/5/2025	Douglas Allen  Contributor address;  unknown	City;	State; Zip Code	375.00
Principal occ Jud	upation / Job title (See Instructions)		Employer (See Instruction State of Texas	ons)
Date 5/19/2025	Full name of contributor Christopher Taylor	uut-of-state PA	C (ID#)	Amount of contribution (\$) 600.00
	Contributor address: unknown	City;	State; Zip Code	
Principal occ Judge	upation / Job title (See Instructions)		Employer (See Instruction State of Texas	ons)

## SCHEDULE A1

The	Instruction Guide explains how to complete this for	orm.	1 Total pages Schedule A1.
	epublican Women PAC	3 Filer ID (Ethics Commission Filer 00016966	
4 Date 3/5/2025	William Brandt	State; Zip Code	7 Amount of contribution (\$) 225.00
Principal occu Judge	pation / Job title (See Instructions) 9	Employer (See Instruc Tarrant County	tions)
Date 4/9/2025	Crhistopher Gregory	State; Zip Code	Amount of contribution (\$) 275.00
Principal occup Judge	pation / Job title (See Instructions)	Employer (See Instruction Tarrant County	ions)
Date 3/31/2025	Full name of contributor		Amount of contribution (\$) 375.00
Principal occup	unknown pation / Job title (See Instructions)	Employer (See Instruction State of Texas	ons)
Date 3/31/2025	Full name of contributor	State; Zip Code	Amount of contribution (\$) 375.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction State of Texas	ons)

## SCHEDULE A1

The	Instruction Guide explains how to complete th	nis form.	1 Total pages Schedule A1:
FILER NAME	publican Women PAC	_	3 Filer ID (Ethics Commission Filers) 00016966
Date 31/2025	5 Full name of contributor	7 Amount of contribution (\$)	
Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction State of Texas	tions)
Date 1/15/2025	Jimmy Blackfock Blayloo	169	Amount of contribution (\$) 425.00
	Contributor address; City; State; Zip Code  unknown		
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)
Date 5/22/2025	Norma Bazan	State: Zip Code	Amount of contribution (\$) 500.00
	upation / Job title (See Instructions)	Employer (See Instruc unknown	ctions)
Date 5/22/2025	Katharin Allan	State; Zip Code Euless, TX 76039	Amount of contribution (\$)
Principal occi	upation / Job title (See Instructions)  UNKNOWN	Employer (See Instru unknown	ctions)

## SCHEDULE A1

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

The	Instruction Guide explains how	v to complete th	nis form.	1 Total pages Schedule A1:	
ort Worth R	epublican Women PAC			3 Filer ID (Ethics Commission Filers 00016966	
Date	5 Full name of contributor	out-of-state F	PAC (ID#)	7 Amount of contribution (\$)	
/22/2025	Dusty Filmore			500.00	
	6 Contributor address:	City,	State; Zip Code	000.00	
	* Military and the second seco	Fort Worth,	TX 76102		
	pation / Job title (See Instructions		9 Employer (See Instruc	tions)	
unk	nown		unknown		
Date	Full name of contributor	out-of-state F	AC (ID#)	Amount of contribution (\$)	
6/10/2025	Leslie Barrows	Leslie Barrows		, ansum of continuation (a)	
	Considerate			500.00	
	Contributor address;	City;	State; Zip Code		
		Sotuh	lake, TX 76092		
Principal occup Attomey	pation / Job title (See Instructions)		Employer (See Instruc	tions)	
Attorney	T		Self		
Date	Full name of contributor	ut-of-state F	AC (ID#)	Amount of contribution (\$)	
6/10/2025	Bert Richardson			500	
	Contributor address;	City;	State; Zip Code		
		,			
Principal occur	pation / Job title (See Instructions)		Employer (See Instruct	V\	
Judge	ou au (ees mondeuns)		unknown	ions)	
Date	Full name of contributor	ut-of-state P	AC (ID#)	Amount of contribution (\$)	
614710005	Trent Loftin				
6/17/2025	Contributor address:	City;	State; Zip Code	375.00	
			State, Zip Gode	010.00	
Principal occur	pation / Job title (See Instructions)		Employer (See Instruc	tione)	
Judge	yauon / bob une (oce maduouons)		State of Texas	uons)	

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### SCHEDULE A1

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

anover  or address: Ci  de (See Instructions)  of contributor out  Clark  or address: Ci  de (See Instructions)	9 Employer (Sec State of Tex Ity; State; Zip Coc State of Tex Ity; State; Zip Coc Employer (Sec State of Tex Ity; State; Zip Coc State of Tex Ity; State; Zip Coc State of Tex Ity;	375.00  de Instructions)  as Amount of contribution (\$)  375.00  de Instructions)
e (See Instructions)  Clark  or address; Ci	9 Employer (See State PAC (ID#:  Employer (See State of Tex	375.00  de Instructions)  as Amount of contribution (\$)  375.00  de Instructions)
of contributor out  Clark  or address; Ci  e (See Instructions)	State of Tex  -of-state PAC (ID#	Amount of contribution (\$)  375.00
Clark or address; Ci	Employer (See	375.00
	State of Tex	To Manda Control Contr
of contributor		as
Olton or address; Cr	-of-state PAC (ID#:	375.00
e (See Instructions)	Employer (See State of Tex	
of contributor out	-of-state PAC (ID#ty; State; Zip Code	Amount of contribution (\$) 375.00
(See Instructions)	Employer (See State of Te	
	e (See Instructions)	

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## SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1:	
FILER NAME Fort Worth R	epublican Women PAC			3 Filer ID (Ethics Commission Filers 00016966	
Date 06/10/2025	Full name of contributor     William Anthony Porter	out-of-state P	AC (ID#)	7 Amount of contribution (\$)	
	6 Contributor address:	City;	State; Zip Code	375.00	
Principal occu Judge	pation / Job title (See Instructions)		9 Employer (See Instruc State of Texas	tions)	
Date	Full name of contributor	Out-of-state P	AC (ID#)	Amount of contribution (\$)	
6/10/2025	An Hsu			375.00	
	Contributor address:	City; ford TX 76	State; Zip Code		
Principal occup Attorn	pation / Job title (See Instructions)		Employer (See Instruc	tions)	
Date 4/1/2025	Full name of contributor Brooke Allen	Dut-of-state P	AC (ID#:)	Amount of contribution (\$) 375.00	
	Contributor address;	City:	State: Zip Code		
Principal occu Judge	pation / Job title (See Instructions)		Employer (See Instruction State of Texas	tions)	
Date	Full name of contributor	out-of-state P/	AC (ID#)	Amount of contribution (\$)	
4/1/2025	John P. Chupp			375.00	
4/ 1/2025	Contributor address:	City;	State; Zip Code	375.00	
	unknown	City,	State. Zip Code	nover a second of the second o	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc		
Juc	lge	-	State of Texa	S	

### SCHEDULE A1

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

The	Instruction Guide explains how to complete	e this form.	1 Total pages Schedule A1:	
FILER NAME	orth Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966	
4 Date 4/1/2025	5 Full name of contributor		7 Amount of contribution (\$)	
			375.00	
	upation / Job title (See Instructions)	9 Employer (See Instruction State of Texas	tions)	
Date 3/1/2025	Don Pierson	State; Zip Code	Amount of contribution (\$) 375.00	
A second	unknown	60 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -		
Principal occupation / Job title (See Instructions)  Judge		Employer (See Instruct State of Texas	Employer (See Instructions) State of Texas	
Date 4/1/2025	Jennifer Rymell	ate PAC (ID#)	Amount of contribution (\$) 375.00	
	Contributor address; City;	State; Zip Code		
Principal occu Judge	upation / Job title (See Instructions)	Employer (See Instruction State of Texas	tions)	
Fric Starnes		ate PAC (ID#)	Amount of contribution (\$)	
4/1/2025	Contributor address: City;	State; Zıp Code	375.00	
Principal occu	upation / Job title (See Instructions)	Employer (See Instruc State of Texas	tions)	

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
CU ER NAME	th Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
Date		(ID#)	7 Amount of contribution (\$)
1/7/2025	Debbie Adame		100
1772025	6 Contributor address: City: Fort Worth Te.	State: Zip Code xas 76102	
Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction Self	
Date		(ID#)	Amount of contribution (\$)
13/2025	Carey Walker		100.00
	Contributor address: City;	State; Zip Code	
Principal occur	pation / Job title (See Instructions)	Employer (See Instruct State of Texas	tions)
Date	Full name of contributor	(1D#:)	Amount of contribution (\$)
1/20/2025	Kathryn Pompa		100.00
	Contributor address; City:	State: Zip Code	
	Fort Wo	orth Texas 76109	
Principal occu unknow	pation / Job title (See Instructions)	Employer (See Instruc unknown	tions)
Date	Full name of contributor out-of-state PAG	(ID#)	Amount of contribution (\$)
1.115	Allison Byrd		100.00
2/16/2025	Contributor address: City;	State: Zip Code	
	Fort Worth Tex	as 76132	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc unknown	tions)

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 If the requested information is not applicable. DO NOT include this page in the report. 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) FILER NAME 00016966 Fort Worth Republican Women PAC 7 Amount of contribution (\$) out-of-state PAC (ID# 5 Full name of contributor Cary Cheshire 2/17/2025 100.00 State: Zip Code City: 6 Contributor address: Benbrook Texas 76116 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) unknown unknown out-of-state PAC (ID# Amount of contribution (\$) Full name of contributor Date Veronica Law 2/18/2025 100.00

city: Stat Fort Worth Texas 76116

Amount of contribution (\$) Full name of contributor ut-of-state PAC (ID# 2/24/2025 Diane Kessler 100.00 State: Zip Code Contributor address; City: Fort Worth, TX Texas 76114 Employer (See Instructions) Principal occupation / Job title (See Instructions) unknown unknown Full name of contributor Amount of contribution (\$) Out-of-state PAC (ID# Date **Dusty Fillmore** 100.00 2/26/2025 Contributor address: State: Zip Code Fort Worth Texas 76102 Employer (See Instructions) Principal occupation / Job title (See Instructions) unknown Attorney

State; Zip Code

unknown

Employer (See Instructions)

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

Contributor address

Principal occupation / Job title (See Instructions)

unknown

## SCHEDULE A1

The	Instruction Guide explains how to c	omplete this form.	1 Total pages Schedule A1:
ort Worth Re	epublican Women PAC		3 Filer ID (Ethics Commission Filers) 00016966
4 Date 2/26/2025	William Knight  6 Contributor address:	City; State; Zip Code  Worth Texas 76196	7 Amount of contribution (\$)
Principal occ unknown	upation / Job title (See Instructions)	9 Employer (See Ins	dructions)
Date 2/26/2025	Mary Frances Wood Contributor address:	out-of-state PAC (ID≢	Amount of contribution (\$)
Principal occu	ripation / Job title (See Instructions)	Employer (See Ins UNKNOWN	tructions)
Date 3/2/2025	Full name of contributor  Jennifer Rymell  Contributor address;	out-of-state PAC (ID#:	Amount of contribution (\$)  100.00
Principal occi	upation / Job title (See Instructions)	Employer (See Ins State of Te	
Date 3/19/202	Randi Hartin	out-of-state PAC (ID#	Amount of contribution (\$)
Principal occi Judge	upation / Job title (See Instructions)	Employer (See Ins	

## SCHEDULE A1

The	Instruction Guide explains how to complete this	is form.	1 Total pages Schedule A1:
2 FILER NAME Fort We	orth Republican Women PAC		3 Filer ID (Ethics Commission Filers 00016966
4 Date 3/19/2025	Pamela Fernandez	State. Zip Code	7 Amount of contribution (\$)
8 Principal occu Attorney	ipation / Job title (See Instructions)	9 Employer (See Instruct Self	tions)
Date 3/25/2025	Contributor address: City;	AC (ID#)  State; Zip Code	Amount of contribution (\$)
Principal occup  Judge	pation / Job title (See Instructions)	Employer (See Instruction State of Texas	ions)
Date 3/26/2025	Julie Lugo	State: Zip Code	Amount of contribution (\$)
Principal occur Judge	pation / Job title (See Instructions)	Employer (See Instruction State of Texas	ions)
Date 3/26/2025	Leslie S Barrows	State; Zip Code	Amount of contribution (\$)
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi Barrows Law Firr	

## SCHEDULE A1

The	Instruction Guide explains how t	to complete th	nis form.	1 Total pages Schedule A1:
2 FILER NAME Fort Worth Re	publican Women PAC			3 Filer ID (Ethics Commission Filer 00016966
4 Date	5 Full name of contributor	Out-of-state P	PAC (10#:)	7 Amount of contribution (\$)
4/24/2025	Norma Bazan  6 Contributor address	City.	State: Zip Code Daks Texas 76114	130.00
assistant (	pation / Job title (See Instructions) district attorney		9 Employer (See Instruction Tarrant County	ons)
Date	Full name of contributor	Out-of-state P	постоя по поставления по	Amount of contribution (C)
5/16/2025	Melanie Tatum			Amount of contribution (\$)
	Contributor address;	City; Ft Worth	State: Zip Code	100.00
Principal occup UNKNOWN	pation / Job title (See Instructions)		Employer (See Instruction Unknown	ons) to Madenari
Date 5/18/2025	Sayeda bilgees syed  Contributor address:	City;	State: Zip Code	Amount of contribution (\$) 130.00
Principal occup unknown	vation / Job title (See Instructions)		Employer (See Instruction unknown	ns)
Date 5/30/2025	Full name of contributor  Connie Blake	ut-of-state PA	AC (ID#	Amount of contribution (\$)
	Contributor address: Fort Worth	City; Texas 761	State; Zip Code	
Principal occup	ation / Job title (See Instructions)		Employer (See Instructio	ns)

## SCHEDULE A1

The	Instruction Guide explains how	w to complete this	s form.	1 Total pages Schedule A1:
FILER NAME Fort Worth I	Republican Women PAC	atikus dipusikaga di timandaran ke-musian kumijudahan aniak se-sa	ark silafin silafika gang lisi nguntan satak kasar salah kan tengan ditan ancinasion salah	3 Filer ID (Ethics Commission Filers) 00016966
Date 3/10/2025	5 Full name of contributor JOHN WHITE 6 Contributor address:	City;	State: Zip Code Texas 76016	7 Amount of contribution (\$) 100.00
Principal occi retir	upation / Job title (See Instructions		9 Employer (See Instruction unknown	ons)
Date	Contributor address;		State; Zip Code	Amount of contribution (\$) 130.00
Principal occu	upation / Job title (See Instructions		Employer (See Instruction Tuttle Equity, Tut	
Date 6/2/2025	Full name of contributor  Debbie Adame  Contributor address;	out-of-state PAG City:	State; Zip Code	Amount of contribution (\$) 400.0
Principal occi	upation / Job title (See Instructions	5)	Employer (See Instructi	ons)
Date	Full name of contributor  Contributor address:	□ out-of-state PAr	C (ID#) State; Zip Code	Amount of contribution (\$)
Principal occ	upation / Job title (See Instructions	s)	Employer (See Instructi	ons)

## POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Advertising Expense Associating/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politics Credit Card Payment	Free Office Ov. Fond/Peverage Expense Printing Expense by Gift/Awards/Memorials Expense Printing Expense	xperse Mages/Contract Labor	Solicitation# undraising Expense Transportation Equipment & Related Expen Travel In District Travel Out Of District Other (enter a category not listed above)
Total pages Schedule F1	2 FILER NAME Fort Worth Republican Women PA	С	3 Filer ID (Ethics Commission Filers 00016966
1/17/2025	Frost Bank		
Amount (5)  Expenditure from corporate funds	7 Payee address: 5651 Bryant Irvin Road, Fort Worth	city. n, TX 76132	State: Zip Gode
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  fees	(b) Description bank fees	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held
Date 2/19/2025	Payee name Frost Bank		
Amount (\$)	Payee address: 5651 Bryant Irvin Road, Fort Worth,	City,	State; Zip Code
corporate funds	oco i Bryant nym rtoad, i ort vyoran,		
PURPOSE OF	- Category (See Categories listed at the top of this schedule)  fees	Description bank fee	es
PURPOSE	Category (See Categories listed at the top of this schedule)	Description bank fee	OS in, TX, officeholder living expense
PURPOSE OF	Category (See Categories listed at the top of this schedule)  fees  Check if trazel outside of Texas, Complete Schedule T.  Candidate / Officehokler name	Description bank fee	
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O	Category (See Categories listed at the top of this schedule)  fees  Check if travel outside of Texas, Complete Schedule T.  Candidate / Officehokler name	Description  bank fee	in, TX, officeholder living expense
PURPOSE OF EXPENDITURE Complete ONLY if direct	Category (See Categories listed at the top of this schedule)  fees  Check if trazel outside of Texas, Complete Schedule T.  Candidate / Officehokler name	Description  bank fee	in, TX, officeholder living expense
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O	Category (See Categories listed at the top of this schedule)  fees  Check if travel outside of Texas, Complete Schedule T.  Candidate / Officeholder name  Payee name	Description  bank fee	in, TX, officeholder living expense
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O  Date 3/18/2025	Category (See Categories listed at the top of this schedule)  fees  Check if havel outside of Texas, Complete Schedule T.  Candidate / Officeholder name  Payee name Frost Bank	Description  bank fee  Check if Austr  Office sought	m, TX, officeholder living expense Office held
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O  Date 3/18/2025  Amount (\$)	Category (See Categories listed at the top of this schedule)  fees  Check if havel outside of Texas, Complete Schedule T.  Candidate / Officeholder name  Payee name Frost Bank  Payee address;	Description  bank fee  Check if Austr  Office sought	m, TX, officeholder living expense Office held
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O  Date 3/18/2025  Amount (\$)	Category (See Categories listed at the top of this schedule)  fees  Check if haveloutside of Texas, Complete Schedule T.  Candidate / Officeholder name  Payee name Frost Bank  Payee address;  5651 Bryant Irvin Road, Fort Worth, T.	Description bank fee	m, TX, officeholder living expense Office held
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O  Date 3/18/2025  Amount (\$)  Expenditure from corporate funds  PURPOSE OF	Category (See Categories listed at the top of this schedule)  fees  Check if hazel outside of Texas, Complete Schedule T.  Candidate / Officeholder name  Payee name Frost Bank  Payee address;  5651 Bryant Irvin Road, Fort Worth, Total Category (See Categories listed at the top of this schedule)	Description bank fee  Check if Austr Office sought  City;  TX 76132  Description bank fees	m, TX, officeholder living expense Office held

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

### SCHEDULE !

	The Instruction Guide explains how to com	plete this form.	
1 Total pages Schedule 1:	<sup>2</sup> FILER NAME Fort Worth Republicafn Women PAC	ann a' man a man deireach a man dam deireach de a' de a' a man ann ann ann an an an an an an an an a	3 Filer ID (Ethics Commission Filers 00016966
<sup>4</sup> Date 1/2/2025	5 Payee name River Crest Country Club	dishinda di grazza sermajan nepi ndara yang menjerja disebili di dalah melansi	Local times with a commentation of materials are real and a state of the comments of the process of the comments of the commen
6 Amount (\$) 14,503.36 Expenditure from corporate funds	7 Payee address: 1501 Western Ave, Fort Worth, TX 76	City	State <b>Z</b> ip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)  Event Expense	required.)	e instructions regarding type of information
Date 1/7/2025	Payee name MULHOLLAND CUSTOM		
Amount (\$) 43.30  Expenditure from corporate funds	Payee address: 1200 W Berry St Ste B, Fort Worth, TX	c <sub>ity</sub> , United States	State Zip Code
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)  Printing expense	Description (See required.)  Membership	name tags
Date 1/31/2025	Payee name Bluehost		
Amount (\$) 21.17 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 required.)  website host	instructions regarding type of information
Date 3/10/2025	Payee name Kruczynski Consulting		
Amount (\$) 594.00 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 required.)  Webmaster	instructions regarding type of information

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

### SCHEDULE !

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1 Total pages Schedule 1:	2 FILER NAME Fort Worth Republicafn Women PAC		3 Filer ID (Ethics C 00016966	ommission Filers)
4 Date 3/31/2025	5 Payee name Citi Club of Fort Worth			
6 Amount (\$)  5736.70  Expenditure from corporate funds	7 Payee address. 301 Commerce St, Fort Worth, TX 7	City 6102	State	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)  Event Expense	required.)	nstructions regarding type o	
Date 3/31/2025	Payee name Citi Club of Fort Worth			
Amount (\$) 873.73  Expenditure from corporate funds	Payee address: 301 Commerce St, Fort Worth, TX	City 76102	State	Zip Code
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)  Event Expense	required.)	nstructions regarding type of	
Date 4/7/2025	Payee name Patricia Burns			
Amount (\$)  35.15  Expenditure from corporate funds	Payee address: 10620 Bluestone Rd. Fort Worth, Tx	City 76108	State	Zip Code
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)  Printing expense	required.)	structions regarding type of	
Date 6/3/2025	Payee name MULHOLLAND CUSTOM			
Amount (\$) 95.26  Expenditure from corporate funds	Payee address: 1200 W Berry St Ste B, Fort Worth, T	City X, United States	State	Zip Code
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)  Printing expense	Description (See in required.)  Membership r	nstructions regarding type on name tags	t information
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

### SCHEDULE !

	The Instruction Guide explains how to com	plete this form.		
Total pages Schedule I	FILER NAME     Fort Worth Republicafn Women PAC	atura (ingala ang an ini Malamananang ana ana an an ang ananan an an	3 Filer ID (Ethics C 00016966	ommission File
<sup>Date</sup> 6/17/2025	5 Payee name Citi Club of Fort Worth			
Amount (\$) 4795.71 Expenditure from corporate funds	7 Payee address. 301 Commerce St, Fort Worth, TX 76	Gity 102	State	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)  Event Expense	required.)	ee instructions regarding type o	
Date 6/17/2025	Payee name Fort Worth Republicafn Women PAC	E. S.		
Amount (\$) 491.12 Expenditure from corporate funds	Payee address 301 Commerce St, Fort Worth, TX 7610	City	State	Zip Code
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)  Event Expense	required.)	ee instructions regarding type o	
Date	Payee name			
Amount (\$)  Expenditure from corporate funds	Payee address;	City	State	Zip Code
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (S required.)	ee instructions regarding type o	finformation
Date	Payee name			
Amount (\$)  Expenditure from corporate funds	Payee address:	City	State	Zip Code
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (S	ee instructions regarding type o	t information



## 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	Filer ID#	
Fort Worth Republicafn Women PAC	00016966	

- 7/16/25

  Texas Ethics Commission

  Date Hand-delivered or Date Postmarked via email

  Receipt # Amount \$

  Date Processed 7/16/25

  Date Imaged
- 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.
- 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 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		Signature of 0	Campaign Treasurer	
Sworn to and subscribed before me by	tr	nis 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	1	Title of officer admini	tarina cat
	thante of officer damminotoring cath		The of officer admini	stering bat
		And Control of the Co	The of officer adminis	sterring da
(2) Unsworn Declaration  My name is Stephanie janiak  10409 Holfer Dr. Fort Worth TV	OR , and my date of	birth is	The cromer agriculture	stering date
	, and my date of(city)	(state)		

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