

# MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC  
COVER SHEET PG 1

|  |  |  |  |   |  |
|--|--|--|--|---|--|
| The MPAC Instruction Guide explains how to complete this form. |  | 1 Filer ID<br>(Ethics Commission Filers)<br>00080382 |  | 2 Total pages filed:<br>9   |  |
| 3 COMMITTEE NAME<br>Texas Strong Republican Women              |  |  |  | OFFICE USE ONLY<br><br>Date Received<br>ELECTRONICALLY FILED<br>08/29/2025<br><br>Date Hand-delivered or Date Postmarked<br><br>Receipt # Amount<br><br>Date Processed<br><br>Date Imaged |  |
| 4 COMMITTEE ADDRESS  | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP<br>PO Box 543<br><br>Argyle, TX 76226-0543   |  |  |   |  |
| 5 CAMPAIGN TREASURER NAME                                      | MS / MRS / MR FIRST MI<br>Frederick C.<br><br>NICKNAME LAST SUFFIX<br>Tate   |  |  |   |  |
| 6 CAMPAIGN TREASURER STREET ADDRESS<br>(Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>959 W Glade Rd<br><br>Hurst, TX 76054   |  |  |   |  |
| 7 CAMPAIGN TREASURER MAILING ADDRESS                           | STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>PO Box 953<br><br>Colleyville, TX 76034  |  |  |   |  |
| 8 CAMPAIGN TREASURER PHONE                                     | AREA CODE PHONE NUMBER EXTENSION<br>(469) 290-7500   |  |  |   |  |
| 9 REPORT TYPE  | <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)  |  |  |   |  |
| 10 MONTHLY REPORT FILING DEADLINE                              | <input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5<br><input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5<br><input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input checked="" type="checkbox"/> September 5 <input type="checkbox"/> December 5 |  |  |   |  |
| 11 PERIOD COVERED  | Month Day Year    THROUGH    Month Day Year<br>07/26/2025    08/25/2025  |  |  |   |  |

GO TO PAGE 2

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

|   |   |
|---|---|
| <b>12 COMMITTEE NAME</b><br>Texas Strong Republican Women | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00080382 |
|---|---|

|   |   |              |
|---|---|--------------|
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | 1. Candidates<br>(Identify by name or, if applicable, classify by party.)             | A. Supported |
|   |   | B. Opposed   |
|   | 2. Measures<br>(Describe by date and location of election and nature of issue.)       | A. Supported |
|   |   | B. Opposed   |
|   | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) |              |

|                               |  |             |
|-------------------------------|--|-------------|
| <b>15 CONTRIBUTION TOTALS</b> | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)<br><input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 0.00     |
|                               | 2. TOTAL POLITICAL CONTRIBUTIONS<br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$ 255.54   |
| EXPENDITURE TOTALS            | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES   | \$ 0.00     |
|                               | 4. TOTAL POLITICAL EXPENDITURES  | \$ 567.34   |
| CONTRIBUTION BALANCE          | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$ 9,909.09 |
| 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.

Frederick C. Tate  
\_\_\_\_\_  
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 - MPAC****FORM MPAC**  
**COVER SHEET PG 3**  
3 of 9

|   |   |   |
|---|---|---|
| <b>17 COMMITTEE NAME</b><br>Texas Strong Republican Women |   | <b>18 Filer ID</b> (Ethics Commission Filers)<br>00080382 |
| <b>19 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE          |   | SUBTOTAL AMOUNT   |
| 1.  | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                 | \$ 150.00   |
| 2.  | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                   | \$ 105.54   |
| 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              | \$ 567.34   |
| 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**

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>                  |  | <b>1</b> Total pages Schedule A1:<br>Sch: 1/1 Rpt: 4/9   |
| <b>2</b> FILER NAME<br>Texas Strong Republican Women                              |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080382 |
| <b>4</b> Date<br>08/09/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Adams, Judy<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Frisco, TX 75033 | <b>7</b> Amount of Contribution (\$)<br><br>\$30.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Eyeglass Designer |  | <b>9</b> Employer (See Instructions)<br>Self-Employed    |
| Date<br>08/13/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Greenawalt, Julia<br><hr/> Contributor address; City; State; Zip Code<br><br>Denton, TX 76207             | Amount of Contribution (\$)<br><br>\$60.00               |
| Principal occupation / Job title (See Instructions)<br>Retired                    |  | Employer (See Instructions)<br>Retired                   |
| Date<br>08/13/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Langa, Patricia<br><hr/> Contributor address; City; State; Zip Code<br><br>Denton, TX 76207               | Amount of Contribution (\$)<br><br>\$60.00               |
| Principal occupation / Job title (See Instructions)<br>Retired                    |  | Employer (See Instructions)<br>Retired                   |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

|  |   |   |   |
|--|---|---|---|
| The Instruction Guide explains how to complete this form.                                      |   | 1 Total pages Schedule A2:<br>Sch: 1/1 Rpt: 5/9                                 |   |
| 2 FILER NAME<br>Texas Strong Republican Women  |   | 3 Filer ID (Ethics Commission Filers)<br>00080382                               |   |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS  |   | \$  |   |
| 5 Date<br>08/05/2025   | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Tate, Fred | 8 Amount of contribution (\$)<br>\$105.54                                       | 9 In-kind contribution description<br>Campaign Bookkeeping Services & Support |
| 7 Contributor address; City; State; Zip Code<br><br>Hurst, TX 76054                            |   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |   |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)<br>Managing Director |   | 11 Employer (FOR NON-JUDICIAL) (See instructions)<br>CFO Shield, LLC            |   |
| 12 Contributor's principal occupation (FOR JUDICIAL)   |   | 13 Contributor's job title (FOR JUDICIAL) (See instructions)                    |   |
| 14 Contributor's employer/law firm (FOR JUDICIAL)  |   | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |   |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)                    |   |   |   |

# 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.

|  |  |   |
|--|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/4 Rpt: 6/9   | <b>2</b> FILER NAME<br>Texas Strong Republican Women   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080382  |
| <b>4</b> Date<br>08/13/2025  | <b>5</b> Payee name<br>Amazon.com, Inc   |   |
| <b>6</b> Amount (\$)<br>\$40.04<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 81226<br><br>Seattle, WA 98108               |   |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense             | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Floral bags for centerpieces for Power of the Purse |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>08/09/2025   | Payee name<br>Anedot Inc.  |   |
| Amount (\$)<br>\$1.50<br><br><input type="checkbox"/> Expenditure from corporate funds           | Payee address; City; State; Zip Code<br>1340 Poydras Street, Suite 1770<br><br>New Orleans, LA 70112 |   |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                      | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Online Donation Processing Fee                      |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>07/28/2025   | Payee name<br>Constant Contact   |   |
| Amount (\$)<br>\$27.71<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 02451                   |   |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense       | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Email Advertising                                   |
| 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 2/4 Rpt: 7/9   | <b>2</b> FILER NAME<br>Texas Strong Republican Women  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080382   |
| <b>4</b> Date<br>08/20/2025  | <b>5</b> Payee name<br>GoDaddy  |  |
| <b>6</b> Amount (\$)<br>\$22.19<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>2155 E. Go Daddy Way<br><br>Tempe, AZ 85260              |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Web Domain Hosting                   |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>08/01/2025   | Payee name<br>Google LLC  |  |
| Amount (\$)<br>\$8.61<br><br><input type="checkbox"/> Expenditure from corporate funds           | Payee address; City; State; Zip Code<br>1600 Amphitheatre Pkwy<br><br>Mountain View, CA 94043             |  |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Google G-Suite Subscription          |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>08/04/2025   | Payee name<br>Office Max  |  |
| Amount (\$)<br>\$76.34<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>6060 Long Prairie Rd<br><br>Flower Mound, TX 75028                |  |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Office Supplies (Envelopes & Labels) |
| 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.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 3/4 Rpt: 8/9  | <b>2</b> FILER NAME<br>Texas Strong Republican Women  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080382  |
| <b>4</b> Date<br>08/25/2025   | <b>5</b> Payee name<br>Robson Publishing Pioneer Press  |   |
| <b>6</b> Amount (\$)<br>\$280.00<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>9532 East Riggs Rd<br><br>Sun Lakes, AZ 85248  |   |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Advertising Inserts for Event |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                               |   |   |
| Date<br>08/07/2025  | Candidate/Officeholder name Office sought Office held   |   |
| Payee name<br>ShoutSocial.com   |   |   |
| Amount (\$)<br>\$10.00<br><br><input type="checkbox"/> Expenditure from corporate funds           | Payee address; City; State; Zip Code<br>1 E Center Street, Suite 300<br><br>Provo, UT 84606   |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Messaging Service Subscription       |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  |   |   |
| Date<br>08/01/2025  | Candidate/Officeholder name Office sought Office held   |   |
| Payee name<br>TFRW  |   |   |
| Amount (\$)<br>\$25.30<br><br><input type="checkbox"/> Expenditure from corporate funds           | Payee address; City; State; Zip Code<br>PO Box 171146<br><br>Austin, TX 78717-0041  |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donation - Membership                |
| 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.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 4/4 Rpt: 9/9   | <b>2</b> FILER NAME<br>Texas Strong Republican Women   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080382   |
| <b>4</b> Date<br>08/13/2025  | <b>5</b> Payee name<br>Walmart   |  |
| <b>6</b> Amount (\$)<br>\$56.29<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>2750 W University Drive<br><br>Denton, TX 76201 |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Food for General Meeting |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>07/28/2025   | Payee name<br>Wow Donuts   |  |
| Amount (\$)<br>\$19.36<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>1236 FM 407 #400<br><br>Northlake, TX 76226              |  |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donuts for Coffee Chat   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name  | Office sought Office held  |