

**GENERAL-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM GPAC
COVER SHEET PG 1**

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00054168	2 Total pages filed: 67			
3 COMMITTEE NAME Salado Area Republican Women		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/03/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged				
4 COMMITTEE ADDRESS P.O. Box 373 Salado, TX 76571 <input type="checkbox"/> Change of Address						
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Fayann			MI		
	NICKNAME Ridgley	LAST	SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 3806 Chisholm Trail Salado, TX 76571	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 3806 Chisholm Trail Salado, TX 76571	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE (254) 681-6532	PHONE NUMBER	EXTENSION			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15	<input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff	<input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination			
10 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
11 ELECTION	ELECTION DATE Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> General	ELECTION TYPE <input type="checkbox"/> Runoff <input type="checkbox"/> Special	<input type="checkbox"/> Other		

GO TO PAGE 2

**GENERAL-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Salado Area Republican Women		13 FILER ID (Ethics Commission Filers) 00054168
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input checked="" 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)	\$ 8,981.39
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 13,328.76
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 18,932.73
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.

Fayann Ridgley

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 67

17 COMMITTEE NAME Salado Area Republican Women	18 FILER ID (Ethics Commission Filers) 00054168
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 8,981.39	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS \$	
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
6. <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
7. <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
8. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
9. <input type="checkbox"/> SCHEDULE E: LOANS \$	
10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 13,328.76	
11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$	
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/51 Rpt: 4/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agree, Joey	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Temple, TX 76502	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agree, Joey	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Temple, TX 76502	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguirre, Jane	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Temple, TX 76504	
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Suzanne	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, Linda	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Temple, TX 76504	
Principal occupation / Job title (See Instructions) property management		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/51 Rpt: 5/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, Linda	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Temple, TX 76502	
8 Principal occupation / Job title (See Instructions) property management		9 Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baird, Addie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Belton, TX 76713	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baird, Addie	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Belton, TX 76713	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balady, Diane	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Travel Advisor		Employer (See Instructions)
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balady, Diane	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Travel Advisor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/51 Rpt: 6/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balady, Diane	7 Amount of Contribution (\$) \$52.00
	6 Contributor address; City; State; Zip Code Belton, TX 76513	
8 Principal occupation / Job title (See Instructions) Travel Advisor		9 Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balady, Diane	Amount of Contribution (\$) \$8.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Travel Advisor		Employer (See Instructions)
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balady, George	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazar, Chris	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazar, Chris	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/51 Rpt: 7/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazar, Chris	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Constable		9 Employer (See Instructions)
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Karin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Karin	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Karin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Pamela	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Nolanville, TX 76559	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/51 Rpt: 8/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 10/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Pamela	7 Amount of Contribution (\$) \$60.00
	6 Contributor address; City; State; Zip Code Nolanville, TX 76559	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boston, Nancy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boston, Nancy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boston, Nancy	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code Temple, TX 76503	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bovey, Cary	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 6/51 Rpt: 9/67
2 FILER NAME Salado Area Republican Women			3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Janet	7 Amount of Contribution (\$) \$20.00	
	6 Contributor address; City; State; Zip Code Belton, TX 76513		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Janet	Amount of Contribution (\$) \$20.00	
	Contributor address; City; State; Zip Code Belton, TX 76513		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadence Bank	Amount of Contribution (\$) \$4.27	
	Contributor address; City; State; Zip Code Salado, TX 76571		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadence Bank	Amount of Contribution (\$) \$4.11	
	Contributor address; City; State; Zip Code Salado, TX 76571		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadence Bank	Amount of Contribution (\$) \$3.54	
	Contributor address; City; State; Zip Code Salado, TX 76571		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/51 Rpt: 10/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadence Bank 6 Contributor address; City; State; Zip Code Salado, TX 76571	7 Amount of Contribution (\$) \$3.73
	8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadence Bank Contributor address; City; State; Zip Code Salado, TX 76571	Amount of Contribution (\$) \$2.91
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadence Bank Contributor address; City; State; Zip Code Salado, TX 76571	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadence Bank Contributor address; City; State; Zip Code Salado, TX 76571	Amount of Contribution (\$) \$2.83
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Diane Contributor address; City; State; Zip Code Salado, TX 76571	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/51 Rpt: 11/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Diane	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Social Worker		9 Employer (See Instructions)
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Mike	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) social worker		Employer (See Instructions)
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Mike	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) social worker		Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canterino, Tony	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Harker Heights, TX 76548	
Principal occupation / Job title (See Instructions) Businessman		Employer (See Instructions)
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canterino, Tony	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Harker Heights, TX 76548	
Principal occupation / Job title (See Instructions) Businessman		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/51 Rpt: 12/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canterino, Tony	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Harker Heights, TX 76548	
8 Principal occupation / Job title (See Instructions) Businessman		9 Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Christi	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chainier, Kellie Ann	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Paulette	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Paulette	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/51 Rpt: 13/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Paulette	7 Amount of Contribution (\$) \$180.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Paulette	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christy's of Salado	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coachman, Kay	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coggin, Diana	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/51 Rpt: 14/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Barbara	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Cliff	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Cliff	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Cliff	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Jocie	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/51 Rpt: 15/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, John	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Josie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culp, Schanna	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Beautician		Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeWees, Emily	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions)
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dolin, Allison	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Belton, TX 78513	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/51 Rpt: 16/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Sharon	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Sharon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Caron	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Caron	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Caron	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/51 Rpt: 17/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Caron	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duran, Carissa	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76517	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duran, Carissa	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76517	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duran, Carissa	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76517	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ervin, Mary Catherine	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/51 Rpt: 18/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 10/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faulkner, Dennis	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Harker Heights, TX 76548	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faulkner, Dennis	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Harker Heights, TX 76548	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faulkner, Dennis	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Harker Heights, TX 76548	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, John	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Temple, TX 76502	
Principal occupation / Job title (See Instructions) state police		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Rosanne	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Temple, TX 76502	
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/51 Rpt: 19/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 12/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleischer, Marilyn	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Newspaper Editor		9 Employer (See Instructions)
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleischer, Tim	Amount of Contribution (\$) \$105.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Newspaper Editor		Employer (See Instructions)
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleischer, Tim	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Newspaper Editor		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Allison	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frascone, Kim	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/51 Rpt: 20/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 12/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Sheree	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gailey, Kelly	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garapati, Abhiram	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Florence, TX 78627	
Principal occupation / Job title (See Instructions) rancher, candidate for Congress		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gauntt, John	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gauntt, John	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/51 Rpt: 21/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillaspie, Beverly	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Belton, TX 76513	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillaspie, Beverly	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillaspie, Beverly	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gribble, Jan	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Pat	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/51 Rpt: 22/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatridge, Jerry	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatridge, Pam	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatridge, Pam	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatridge, Pam	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatridge, Pam	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/51 Rpt: 23/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatridge, Pam	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Havelka, Janet	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) sm busn owner		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Elaine	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Elaine	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Elaine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/51 Rpt: 24/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrick, Elaine	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holdampf, Karin	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollingsworth, Pam	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Salado, TX 76513	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Brenda	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Brenda	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/51 Rpt: 25/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Brenda	7 Amount of Contribution (\$) \$90.00
	6 Contributor address; City; State; Zip Code Belton, TX 76513	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Brenda	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Brenda	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Jeff	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Chip	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Temple, TX 76502	
Principal occupation / Job title (See Instructions) Legislative assistant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/51 Rpt: 26/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Lynette	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Museum Director		9 Employer (See Instructions)
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justice, Christie	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justice, Christie	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justice, Christie	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justice, Christie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/51 Rpt: 27/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krska, John	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Belton, TX 76513	
8 Principal occupation / Job title (See Instructions) HEB manager		9 Employer (See Instructions)
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krska, Katherine	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krska, Katherine	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krska, Katherine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krska, Katherine	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/51 Rpt: 28/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 10/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lively, Jeanie	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Librarian		9 Employer (See Instructions)
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luedke, Laura	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Holland, TX 76534	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luedke, Shay	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Tax Assessor		Employer (See Instructions)
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luedke, Shay	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Holland, TX 76534	
Principal occupation / Job title (See Instructions) Tax Assessor		Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lytle, Kerri	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/51 Rpt: 29/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martindale, Lacie	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Belton, TX 76513	
8 Principal occupation / Job title (See Instructions) Bell Cnty employee		9 Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martindale, Lacie	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Bell Cnty employee		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Maria	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Evelyn	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Jarrell, TX 76537	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Evelyn	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Jarrell, TX 76537	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/51 Rpt: 30/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Evelyn	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Jarrell, TX 76537	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Evelyn	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code Jarrell, TX 76537	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Evelyn	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Jarrell, TX 76537	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Jerry	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Jarrell, TX 76537	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCort, Barclay	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/51 Rpt: 31/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCort, Barclay	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCort, Barclay	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCort, Barclay	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCort, Barclay	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCort, Barclay	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/51 Rpt: 32/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCort, Danney	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCort, Danney	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Kate	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Leander, TX 78641	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Kate	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Leander, TX 78641	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinley, Carl	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Holland, TX 76534	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/51 Rpt: 33/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLean, Kristin	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLeod, Kathy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLeod, Kathy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLeod, Kathy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckinley, Kate	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Holland, TX 76534	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/51 Rpt: 34/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckinley, Kate	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Holland, TX 76534	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckinley, Kate	Amount of Contribution (\$) \$345.00
	Contributor address; City; State; Zip Code Holland, TX 76534	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckinley, Kate	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Holland, TX 76534	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckinley, Kate	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Holland, TX 76534	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melsha, Michele	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Temple, TX 76504	
Principal occupation / Job title (See Instructions) Admin. Assistant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/51 Rpt: 35/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 10/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melsha, Michele	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Temple, TX 76502	
8 Principal occupation / Job title (See Instructions) Admin. Assistant		9 Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melsha, Michele	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Temple, TX 76502	
Principal occupation / Job title (See Instructions) Admin. Assistant		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, LaNora	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minick, Cheyenne	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Killeen, TX 76542	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minick, Cheyenne	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Killeen, TX 76542	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/51 Rpt: 36/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minick, Louanne	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Killeen, TX 76542	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minick, Louanne	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Killeen, TX 76542	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minick, Louanne	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Killeen, TX 76542	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morin, Janice	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morin, Janice	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/51 Rpt: 37/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Julie	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Belton, TX 76513	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newton, Kim	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Jim	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Bell County Attorney		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Jim	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Bell County Attorney		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Nancy	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/51 Rpt: 38/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Nancy 6 Contributor address; City; State; Zip Code Salado, TX 76571	7 Amount of Contribution (\$) \$30.00
	8 Principal occupation / Job title (See Instructions) Retired	
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Nancy Contributor address; City; State; Zip Code Salado, TX 76571	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Retired	
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Nancy Contributor address; City; State; Zip Code Salado, TX 76571	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Retired	
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Robert Contributor address; City; State; Zip Code Salado, TX 76571	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Retired	
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oldham, Louise Contributor address; City; State; Zip Code Belton, TX 76513	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/51 Rpt: 39/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oldham, Louise	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Belton, TX 76513	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Organ, Amanda	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Chamber Admin		Employer (See Instructions)
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oyas, Linda	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Ruth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennington, Joyce	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/51 Rpt: 40/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennington, Joyce	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions)
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perhach, Sherril	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perhach, Sherril	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perhach, Sherril	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perhach, Sherril	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/51 Rpt: 41/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perhach, Sherril	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Belton, TX 76513	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrich, Asha	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Temple, TX 76501	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrich, Asha	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Temple, TX 76501	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prall, Deanne	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeder, Darla	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/51 Rpt: 42/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeder, Darla	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rehm, Pat	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Temple, TX 76504	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reusch, Jim	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) sm busn owner		Employer (See Instructions)
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhiddlehoover, Kelli	Amount of Contribution (\$) \$210.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Adm Assistant		Employer (See Instructions)
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ridgley, Fayann	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired RN		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/51 Rpt: 43/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ridgley, Fayann	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) retired RN		9 Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ridgley, Fayann	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired RN		Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ridgley, Fayann	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired RN		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Carolyn	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Deanna	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/51 Rpt: 44/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 10/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutherford, Marla	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Hair Dresser		9 Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandor, Brandy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sapp, Richard	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions)
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sapp, Richard	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions)
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sapp, Richard	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/51 Rpt: 45/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sapp, Richard	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) law enforcement		9 Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sapp, Richard	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions)
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Buddy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Theresa	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Theresa	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/51 Rpt: 46/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherwood, Amy	7 Amount of Contribution (\$) \$60.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Small business owner		9 Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shute, Suzy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code CoeurD'Alene, ID 83814	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spinks, Randi	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) sm busn owner		Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spinks, Randi	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) sm busn owner		Employer (See Instructions)
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephenson, John	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76548	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/51 Rpt: 47/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephenson, John	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Salado, TX 76548	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephenson, Shirley	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephenson, Shirley	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephenson, Shirley	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephenson, Shirley	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/51 Rpt: 48/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephenson, Shirley	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephenson, Shirley	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strang, Paul	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuckey, Marty	Amount of Contribution (\$) \$165.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) sm. busn. owner		Employer (See Instructions)
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swarthout, Barbara	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/51 Rpt: 49/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 10/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swarthout, Barbara	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swarthout, Barbara	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swarthout, Barbara	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swarthout, Dave	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Museum Director		Employer (See Instructions)
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swarthout, Dave	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Museum Director		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/51 Rpt: 50/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 10/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tester, Jennifer	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) beautician		9 Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thrasher, Carol	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thrasher, Carol	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tice, Casey	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions)
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tice, Michael	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) travel agent		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/51 Rpt: 51/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tice, Mchael	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) travel agent		9 Employer (See Instructions)
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tice, Mchael	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) travel agent		Employer (See Instructions)
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trinh, Tom (Dr.)	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) dentist		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler, Fletcher	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) sm busn owner		Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Uschek, Pamela	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Belton, TX 76513	
Principal occupation / Job title (See Instructions) Sonogram Tech		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/51 Rpt: 52/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Winkle, Shay	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Salado, TX 76571	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Village Spirits	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Fay	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Fay	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Zenia	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Killeen, TX 78654	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/51 Rpt: 53/67
2 FILER NAME Salado Area Republican Women		3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitson, Bobby	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Harker Heights, TX 76548	
8 Principal occupation / Job title (See Instructions) Bell County commissioner		9 Employer (See Instructions)
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitson, Bobby	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Harker Heights, TX 76548	
Principal occupation / Job title (See Instructions) Bell County commissioner		Employer (See Instructions)
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiede, April Lynn	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilton, Bill	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilton, Bill	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: Sch: 51/51 Rpt: 54/67	
2 FILER NAME Salado Area Republican Women			3 Filer ID (Ethics Commission Filers) 00054168	
4 Date 09/05/2025	5 Full name of contributor Wilton, Lynne	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$20.00	
	6 Contributor address; City; State; Zip Code Salado, TX 76571			
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)		
Date 09/26/2025	Full name of contributor Wilton, Lynne		<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)		
Date 09/26/2025	Full name of contributor Wilton, Lynne		<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Salado, TX 76571			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)		
Date 10/27/2025	Full name of contributor Winterhalter, Josephine		<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Salado, TX 76571			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/13 Rpt: 55/67	2 FILER NAME Salado Area Republican Women	3 Filer ID (Ethics Commission Filers) 00054168	
4 Date 12/12/2025	5 Payee name ABBOTT-IPCO, Inc		
6 Amount (\$) \$2,189.40	7 Payee address; City; PO Box 551329 Dallas, TX 75355	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 246 poinsettias to sell for poinsettia event	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/26/2025	Payee name Berg, Karin		
Amount (\$) \$9.00	Payee address; City; REDACTED PER 254.0401, ELEC. CODE Salado, TX 76571	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense supplies for general meeting	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/07/2025	Payee name Berg, Karin		
Amount (\$) \$195.00	Payee address; City; REDACTED PER 254.0401, ELEC. CODE Salado, TX 76571	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement for TFRW convention	
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/13 Rpt: 56/67	2 FILER NAME Salado Area Republican Women	3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/29/2025	5 Payee name Cadence Bank	
6 Amount (\$) \$4.17	7 Payee address; City; 50 So Main St. Salado, TX 76571	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense clover fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/20/2025	Payee name Cadence Bank	
Amount (\$) \$0.62	Payee address; City; 50 So Main St. Salado, TX 76571	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense clover credit card fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/25/2025	Payee name Cadence Bank	
Amount (\$) \$19.36	Payee address; City; 50 So Main St. Salado, TX 76571	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense clover CC fees
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/13 Rpt: 57/67	2 FILER NAME Salado Area Republican Women	3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/05/2025	5 Payee name Cadence Bank	
6 Amount (\$) \$5.00	7 Payee address; City; State; Zip Code 50 So Main St. Salado, TX 76571	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense to reimburse bank to correct deposit error
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/05/2025	Payee name Candidate Resource Committee	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 101 Falling Creek Cove Marble Falls, TX 78654	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation to campaign
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/28/2025	Payee name Great West. Dining Service	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 6200 W. Central Expressway Killeen, TX 75649	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense deposit 2026 FCL catering
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/13 Rpt: 58/67	2 FILER NAME Salado Area Republican Women	3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/19/2025	5 Payee name Harland Clarke	
6 Amount (\$) \$34.16	7 Payee address; City; 50 S. Main Salado, TX 76571	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printed check charge
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name Hatridge, Pam	
Amount (\$) \$195.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Salado, TX 76571	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement for TFRW convention
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name Herrick, Elaine	
Amount (\$) \$195.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Salado, TX 76571	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement for TFRW convention
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1: Sch: 5/13 Rpt: 59/67	2 FILER NAME Salado Area Republican Women	3 Filer ID (Ethics Commission Filers) 00054168	
4 Date 09/08/2025	5 Payee name Howard, Brenda		
6 Amount (\$) \$608.97	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Belton, TX 76513		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense scarves for fundraiser	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held	
Date 11/07/2025	Payee name Howard, Brenda		
Amount (\$) \$195.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Belton, TX 76513		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement for TFRW convention	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held	
Date 12/01/2025	Payee name Justice, Christie		
Amount (\$) \$38.71	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Salado, TX 76571		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement for printing/paper	
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/13 Rpt: 60/67	2 FILER NAME Salado Area Republican Women	3 Filer ID (Ethics Commission Filers) 00054168
4 Date 09/26/2025	5 Payee name Mc3 Catering	
6 Amount (\$) \$731.25	7 Payee address; City; State; Zip Code PO Box 743 Holland, TX 76534	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense lunch for general meeting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name Mc3 Catering	
Amount (\$) \$586.25	Payee address; City; State; Zip Code PO Box 743 Holland, TX 76534	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food expense for general meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name McCort, Barclay	
Amount (\$) \$195.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Salado, TX 76571	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement for TFRW convention
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/13 Rpt: 61/67	2 FILER NAME Salado Area Republican Women	3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/07/2025	5 Payee name McCort, Barclay	
6 Amount (\$) \$241.20	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Salado, TX 76571	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement for postage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/19/2025	Payee name National Warfare Museum	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 207 South 3 St. Ste 100 Copperas Cove, TX 76522	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bricks for veterans
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name Norris, Nancy	
Amount (\$) \$195.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Salado, TX 76571	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement for TFRW convention
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/13 Rpt: 62/67	2 FILER NAME Salado Area Republican Women	3 Filer ID (Ethics Commission Filers) 00054168
4 Date 11/07/2025	5 Payee name Ridgley, Fayann	
6 Amount (\$) \$195.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Salado, TX 76571	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement for TFRW convention
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name Salado ISD	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 601 N. Main St. Salado, TX 76571	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense room rental fee for board meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name Salado ISD	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 601 N. Main St. Salado, TX 76571	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense room rental for meetings
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/13 Rpt: 63/67	2 FILER NAME Salado Area Republican Women	3 Filer ID (Ethics Commission Filers) 00054168
4 Date 12/03/2025	5 Payee name Salado ISD	
6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 601 N. Main St. Salado, TX 76571	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense rent for Nov meetings
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/29/2025	Payee name Staples	
Amount (\$) \$108.24	Payee address; City; State; Zip Code 2112 SW HK Dodgen Lp Temple, TX 76504	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printer ink
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name Swarthout, Barbara	
Amount (\$) \$195.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Salado, TX 76571	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement for TFRW convention
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/13 Rpt: 64/67	2 FILER NAME Salado Area Republican Women	3 Filer ID (Ethics Commission Filers) 00054168
4 Date 08/26/2025	5 Payee name TFRW	
6 Amount (\$) \$25.30	7 Payee address; City; P O Box 171146 Austin, TX 78717	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership dues
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name TFRW	
Amount (\$) \$20.20	Payee address; City; P O Box 171146 Austin, TX 78717	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership dues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name TFRW	
Amount (\$) \$910.80	Payee address; City; P O Box 171146 Austin, TX 78717	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership dues
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/13 Rpt: 65/67	2 FILER NAME Salado Area Republican Women	3 Filer ID (Ethics Commission Filers) 00054168
4 Date 12/06/2025	5 Payee name TFRW	
6 Amount (\$) \$507.50	7 Payee address; City; State; Zip Code P O Box 171146 Austin, TX 78717	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW Patron dues
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/16/2025	Payee name TFRW Convention PAC	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 1301 Vista Del Monte San Antonio, TX 78216	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW program listing for convention
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/19/2025	Payee name Temple College	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 2600 S. First Street Temple, TX 76504	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense scholarship
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/13 Rpt: 66/67	2 FILER NAME Salado Area Republican Women	3 Filer ID (Ethics Commission Filers) 00054168
4 Date 08/20/2025	5 Payee name Texas A&M University	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 400 Bizzell Street College Station, TX 77843	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SARW scholarship (Edwards)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/09/2025	Payee name Vici Media Group	
Amount (\$) \$80.06	Payee address; City; State; Zip Code 5101 Bonneville Bend Austin, TX 78744	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee for adding Anedot
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/12/2025	Payee name Vici Media Group	
Amount (\$) \$348.57	Payee address; City; State; Zip Code 5101 Bonneville Bend Austin, TX 78744	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense website hosting, FB updates
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/13 Rpt: 67/67	2 FILER NAME Salado Area Republican Women	3 Filer ID (Ethics Commission Filers) 00054168
4 Date 08/11/2025	5 Payee name Wilton, Lynne	
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Salado, TX 76571	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Caring for America Project
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name Wilton, Lynne	
Amount (\$) \$100.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Salado, TX 76571	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement for Caring for America
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held