

# 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<br>(Ethics Commission Filers)<br>00015743  | 2 Total pages filed:<br>84  |
| 3 COMMITTEE NAME<br>Northwest Austin Republican Women                                  |  |   | OFFICE USE ONLY<br>Date Received<br>ELECTRONICALLY FILED<br>01/12/2026<br>Date Hand-delivered or Date Postmarked<br>Receipt # Amount<br>Date Processed<br>Date Imaged |
| 4 COMMITTEE ADDRESS<br><br><input type="checkbox"/> Change of Address                  | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>9500 Eagle Knoll Dr.<br><br>Austin, TX 78717   |   |   |
| 5 CAMPAIGN TREASURER NAME  | MS / MRS / MR FIRST MI<br>Ms. Carla<br>NICKNAME LAST SUFFIX<br>Birk  |   |   |
| 6 CAMPAIGN TREASURER STREET ADDRESS<br>(Residence or Business)                         | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>3724 Ashbury Rd.<br><br>Round Rock, TX 78681  |   |   |
| 7 CAMPAIGN TREASURER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>3724 Ashbury Rd.<br><br>Round Rock, TX 78681   |   |   |
| 8 CAMPAIGN TREASURER PHONE   | AREA CODE PHONE NUMBER EXTENSION<br>(512) 517-6129   |   |   |
| 9 REPORT TYPE  | <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)<br><input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination<br><input type="checkbox"/> Runoff |   |   |
| 10 PERIOD COVERED  | Month Day Year<br>07/01/2025 THROUGH Month Day Year<br>12/31/2025  |   |   |
| 11 ELECTION  | ELECTION DATE<br>Month Day Year  | ELECTION TYPE<br><input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |   |

GO TO PAGE 2

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

|   |  |  |           |
|---|--|--|-----------|
| <b>12 COMMITTEE NAME</b><br>Northwest Austin Republican Women   |  | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00015743  |           |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)                     | A. Supported   |           |
|   |  | B. Opposed   |           |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)               | A. Supported   |           |
|   |  | B. Opposed   |           |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.)         | Republican   |           |
|   | <b>15 CONTRIBUTION TOTALS</b>  | <b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b><br><input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 144.36 |
| <b>2. TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)          |  | \$ 10,742.06   |           |
| EXPENDITURE TOTALS  | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>  | \$ 0.00  |           |
|   | <b>4. TOTAL POLITICAL EXPENDITURES</b>   | \$ 9,814.71  |           |
| CONTRIBUTION BALANCE  | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>        | \$ 12,853.68   |           |
| OUTSTANDING LOAN TOTALS   | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b> | \$ 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.

Ms. Carla Birk

\_\_\_\_\_  
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 84

|   |   |   |
|---|---|---|
| <b>17 COMMITTEE NAME</b><br>Northwest Austin Republican Women |   | <b>18 Filer ID</b> (Ethics Commission Filers)<br>00015743 |
| <b>19 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE              |   | SUBTOTAL AMOUNT   |
| 1.  | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                 | \$ 10,702.06  |
| 2.  | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                   | \$ 40.00  |
| 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              | \$ 9,814.71   |
| 11.   | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$  |
| 12.   | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                        | \$  |
| 13.   | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  | \$  |
| 14.   | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                      | \$  |
| 15.   | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER       | \$  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 1/60 Rpt: 4/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743 |
| <b>4</b> Date<br>12/03/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Allred, Deborah<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78750 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired |  | <b>9</b> Employer (See Instructions)                     |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Baird, JoAn<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                       | Amount of Contribution (\$)<br><br>\$10.00               |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                              |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Baird, JoAn<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                       | Amount of Contribution (\$)<br><br>\$10.00               |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                              |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Balido, Jennifer<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75229                  | Amount of Contribution (\$)<br><br>\$10.00               |
| Principal occupation / Job title (See Instructions)<br>judge            |  | Employer (See Instructions)                              |
| Date<br>09/26/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bebbee, Pam<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                       | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Realtor          |  | Employer (See Instructions)<br>Self                      |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 2/60 Rpt: 5/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743 |
| <b>4</b> Date<br>10/27/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bebee, Pam<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Realtor |   | <b>9</b> Employer (See Instructions)<br>Self             |
| Date<br>12/04/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bebee, Pam<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                   | Amount of Contribution (\$)<br><br>\$42.00               |
| Principal occupation / Job title (See Instructions)<br>Realtor          |   | Employer (See Instructions)<br>Self                      |
| Date<br>08/20/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Birk, Carla<br><hr/> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78681              | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                              |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Birk, Carla<br><hr/> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78681              | Amount of Contribution (\$)<br><br>\$20.00               |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                              |
| Date<br>09/29/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Birk, Carla<br><hr/> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78681              | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 3/60 Rpt: 6/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743 |
| <b>4</b> Date<br>11/06/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Birk, Carla<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78681 | <b>7</b> Amount of Contribution (\$)<br><br>\$165.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)                     |
| Date<br>10/31/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Birk, Carla<br><hr/> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78681                   | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                              |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Birk, Carla<br><hr/> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78681                   | Amount of Contribution (\$)<br><br>\$60.62               |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                              |
| Date<br>12/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Birk, Carla<br><hr/> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78681                   | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                              |
| Date<br>07/23/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Blazine, Maria<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                    | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Retired          |  | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 4/60 Rpt: 7/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743 |
| <b>4</b> Date<br>08/26/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Blazine, Maria<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired |   | <b>9</b> Employer (See Instructions)                     |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bradberry, Timothy<br>Contributor address; City; State; Zip Code<br><br>Pflugerville, TX 78660-5108    | Amount of Contribution (\$)<br><br>\$50.00               |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                              |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brinkman, Shirley<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78750                | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                              |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brinkman, Shirley<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78750                | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                              |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brinkman, Shirley<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78750                | Amount of Contribution (\$)<br><br>\$30.00               |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 5/60 Rpt: 8/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743 |
| <b>4</b> Date<br>11/10/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brinkman, Shirley<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78750 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)                     |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brinkman, Shirley<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78750                   | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                              |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Burris, Susan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78729                       | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Retired          |  | Employer (See Instructions)                              |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Burris, Susan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78729                       | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Retired          |  | Employer (See Instructions)                              |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Burris, Susan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78729                       | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Retired          |  | Employer (See Instructions)                              |



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|  |  |   |
|--|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>           |  | <b>1</b> Total pages Schedule A1:<br>Sch: 6/60 Rpt: 9/84  |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743  |
| <b>4</b> Date<br>11/10/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Burris, Susan<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78729 | <b>7</b> Amount of Contribution (\$)<br><br>\$30.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired    |  | <b>9</b> Employer (See Instructions)                      |
| Date<br>11/10/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Burris, Susan<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78729                   | Amount of Contribution (\$)<br><br>\$55.00                |
| Principal occupation / Job title (See Instructions)<br>Retired             |  | Employer (See Instructions)                               |
| Date<br>11/10/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Burris, Susan<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78729                   | Amount of Contribution (\$)<br><br>\$25.00                |
| Principal occupation / Job title (See Instructions)<br>Retired             |  | Employer (See Instructions)                               |
| Date<br>12/22/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Burris, Susan<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78729                   | Amount of Contribution (\$)<br><br>\$25.00                |
| Principal occupation / Job title (See Instructions)<br>Retired             |  | Employer (See Instructions)                               |
| Date<br>11/10/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Chaudhari, Rupal<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641               | Amount of Contribution (\$)<br><br>\$10.00                |
| Principal occupation / Job title (See Instructions)<br>Attorney/Accountant |  | Employer (See Instructions)<br>Pecan Park Hospitality LLC |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 7/60 Rpt: 10/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743  |
| <b>4</b> Date<br>08/06/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cloud, Crystle<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>marketing |  | <b>9</b> Employer (See Instructions)<br>self              |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cloud, Crystle<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$25.00                |
| Principal occupation / Job title (See Instructions)<br>marketing          |  | Employer (See Instructions)<br>self                       |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cloud, Crystle<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$25.00                |
| Principal occupation / Job title (See Instructions)<br>marketing          |  | Employer (See Instructions)<br>self                       |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cloud, Crystle<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$25.00                |
| Principal occupation / Job title (See Instructions)<br>marketing          |  | Employer (See Instructions)<br>self                       |
| Date<br>12/04/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cloud, Crystle<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$89.00                |
| Principal occupation / Job title (See Instructions)<br>marketing          |  | Employer (See Instructions)<br>self                       |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 8/60 Rpt: 11/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743  |
| <b>4</b> Date<br>12/03/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cloud, Crystle<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>marketing |  | <b>9</b> Employer (See Instructions)<br>self              |
| Date<br>07/25/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cocco, Cathy (Mrs.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759               | Amount of Contribution (\$)<br><br>\$50.00                |
| Principal occupation / Job title (See Instructions)<br>Engineer           |  | Employer (See Instructions)                               |
| Date<br>10/02/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cocco, Cathy (Mrs.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759               | Amount of Contribution (\$)<br><br>\$90.00                |
| Principal occupation / Job title (See Instructions)<br>Marketing Manager  |  | Employer (See Instructions)<br>IBM                        |
| Date<br>10/02/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cocco, Cathy (Mrs.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759               | Amount of Contribution (\$)<br><br>\$85.00                |
| Principal occupation / Job title (See Instructions)<br>Marketing Manager  |  | Employer (See Instructions)<br>IBM                        |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cocco, Cathy (Mrs.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759               | Amount of Contribution (\$)<br><br>\$50.00                |
| Principal occupation / Job title (See Instructions)<br>Marketing Manager  |  | Employer (See Instructions)<br>IBM                        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 9/60 Rpt: 12/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743  |
| <b>4</b> Date<br>11/21/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Damman, Debra<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78729 | <b>7</b> Amount of Contribution (\$)<br><br>\$27.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)                      |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Davis, Vicki<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                    | Amount of Contribution (\$)<br><br>\$25.00                |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                               |
| Date<br>10/24/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Davis, Vicki<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                    | Amount of Contribution (\$)<br><br>\$27.00                |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                               |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Derrick, Jennifer<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78737               | Amount of Contribution (\$)<br><br>\$50.00                |
| Principal occupation / Job title (See Instructions)<br>realtor          |  | Employer (See Instructions)                               |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Dibble, Judy<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                    | Amount of Contribution (\$)<br><br>\$50.00                |
| Principal occupation / Job title (See Instructions)<br>Retired          |  | Employer (See Instructions)                               |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 10/60 Rpt: 13/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/10/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Dibble, Judy<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>07/28/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Donadio, Rosemary<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78732              | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>08/20/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Donadio, Rosemary<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78732              | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>09/30/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Donadio, Rosemary<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78732              | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>10/23/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Donadio, Rosemary<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78732              | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 11/60 Rpt: 14/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/19/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Donadio, Rosemary<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78732 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Donadio, Rosemary<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78732                   | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Donadio, Rosemary<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78732                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>12/29/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Donadio, Rosemary<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78732                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>08/07/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Duncan, Jan<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78732                         | Amount of Contribution (\$)<br><br>\$60.00                 |
| Principal occupation / Job title (See Instructions)<br>Transcriptionist |  | Employer (See Instructions)<br>Self Employed               |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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| <b>The Instruction Guide explains how to complete this form.</b>                 |  | <b>1</b> Total pages Schedule A1:<br>Sch: 12/60 Rpt: 15/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                         |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>08/06/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Duncan, Jan<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78732 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Transcriptionist |  | <b>9</b> Employer (See Instructions)<br>Self Employed      |
| Date<br>11/20/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Duncan, Jan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78732                   | Amount of Contribution (\$)<br><br>\$89.00                 |
| Principal occupation / Job title (See Instructions)<br>Transcriptionist          |  | Employer (See Instructions)<br>Self Employed               |
| Date<br>11/10/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Duncan, Jan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78732                   | Amount of Contribution (\$)<br><br>\$56.29                 |
| Principal occupation / Job title (See Instructions)<br>Transcriptionist          |  | Employer (See Instructions)<br>Self Employed               |
| Date<br>11/10/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Duncan, Jan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78732                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Transcriptionist          |  | Employer (See Instructions)<br>Self Employed               |
| Date<br>12/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Duncan, Jan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78732                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Transcriptionist          |  | Employer (See Instructions)<br>Self Employed               |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 13/60 Rpt: 16/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>08/06/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Edwards, Rosemary<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78732 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Edwards, Rosemary<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78732                   | Amount of Contribution (\$)<br><br>\$5.00                  |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Edwards, Rosemary<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78732                   | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Edwards, Rosemary<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78732                   | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Edwards, Rosemary<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78732                   | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 14/60 Rpt: 17/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>12/03/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Edwards, Rosemary<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78732 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>12/08/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Edwards, Rosemary<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78732                   | Amount of Contribution (\$)<br><br>\$99.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>09/29/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Elizonda, Kristina<br><hr/> Contributor address; City; State; Zip Code<br><br>austin, TX 78750                  | Amount of Contribution (\$)<br><br>\$32.00                 |
| Principal occupation / Job title (See Instructions)<br>CEO              |  | Employer (See Instructions)                                |
| Date<br>11/28/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Elizonda, Kristina<br><hr/> Contributor address; City; State; Zip Code<br><br>austin, TX 78750                  | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>CEO              |  | Employer (See Instructions)                                |
| Date<br>12/16/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Elizonda, Kristina<br><hr/> Contributor address; City; State; Zip Code<br><br>austin, TX 78750                  | Amount of Contribution (\$)<br><br>\$56.29                 |
| Principal occupation / Job title (See Instructions)<br>CEO              |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 15/60 Rpt: 18/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>09/19/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ferguson, Sarah<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78734 | <b>7</b> Amount of Contribution (\$)<br><br>\$86.12        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>nursing |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>08/07/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Fitzpatrick, Lesli<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78717                | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>attorney         |  | Employer (See Instructions)<br>self                        |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Fowler, Kathryn<br><hr/> Contributor address; City; State; Zip Code<br><br>Georgetown, TX 78626               | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>lawyer           |  | Employer (See Instructions)                                |
| Date<br>08/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Friedrich, Susan<br><hr/> Contributor address; City; State; Zip Code<br><br>Georgetown, TX 78628              | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>bookkeeper       |  | Employer (See Instructions)<br>self                        |
| Date<br>11/28/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Friedrich, Susan<br><hr/> Contributor address; City; State; Zip Code<br><br>Georgetown, TX 78628              | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>bookkeeper       |  | Employer (See Instructions)<br>self                        |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>           |   | <b>1</b> Total pages Schedule A1:<br>Sch: 16/60 Rpt: 19/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                   |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>12/03/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Friedrich, Susan<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Georgetown, TX 78628 | <b>7</b> Amount of Contribution (\$)<br><br>\$30.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>bookkeeper |   | <b>9</b> Employer (See Instructions)<br>self               |
| Date<br>10/02/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Gafford, Wesley<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78747                        | Amount of Contribution (\$)<br><br>\$59.00                 |
| Principal occupation / Job title (See Instructions)<br>unk                 |   | Employer (See Instructions)                                |
| Date<br>10/01/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Gayhart, Barbara<br>Contributor address; City; State; Zip Code<br><br>austin, TX 78759                       | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired             |   | Employer (See Instructions)                                |
| Date<br>10/24/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Gayhart, Barbara<br>Contributor address; City; State; Zip Code<br><br>austin, TX 78759                       | Amount of Contribution (\$)<br><br>\$27.00                 |
| Principal occupation / Job title (See Instructions)<br>retired             |   | Employer (See Instructions)                                |
| Date<br>12/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Gayhart, Barbara<br>Contributor address; City; State; Zip Code<br><br>austin, TX 78759                       | Amount of Contribution (\$)<br><br>\$47.00                 |
| Principal occupation / Job title (See Instructions)<br>retired             |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 17/60 Rpt: 20/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>12/03/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Gayhart, Barbara<br><b>6</b> Contributor address; City; State; Zip Code<br><br>austin, TX 78759 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>08/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Gontko, Carol<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78726                      | Amount of Contribution (\$)<br><br>\$52.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Gontko, Carol<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78726                      | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Gontko, Carol<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78726                      | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Gontko, Carol<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78726                      | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 18/60 Rpt: 21/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>10/28/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Gontko, Carol<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78726 | <b>7</b> Amount of Contribution (\$)<br><br>\$55.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Gontko, Carol<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78726                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Grant, Marion<br><hr/> Contributor address; City; State; Zip Code<br><br>austin, TX 78759                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>07/23/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Green, Terry<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78750                    | Amount of Contribution (\$)<br><br>\$97.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Green, Terry<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78750                    | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>         |   | <b>1</b> Total pages Schedule A1:<br>Sch: 19/60 Rpt: 22/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                 |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>12/03/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Green, Terry<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78750 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired  |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>07/14/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Guerra, April<br><hr/> Contributor address; City; State; Zip Code<br><br>Cedar Park, TX 78631              | Amount of Contribution (\$)<br><br>\$27.00                 |
| Principal occupation / Job title (See Instructions)<br>Financial Analyst |   | Employer (See Instructions)                                |
| Date<br>07/14/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Guerra, April<br><hr/> Contributor address; City; State; Zip Code<br><br>Cedar Park, TX 78631              | Amount of Contribution (\$)<br><br>\$60.00                 |
| Principal occupation / Job title (See Instructions)<br>Financial Analyst |   | Employer (See Instructions)                                |
| Date<br>08/06/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hanson, Carole<br><hr/> Contributor address; City; State; Zip Code<br><br>Manor, TX 78653                  | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired           |   | Employer (See Instructions)                                |
| Date<br>07/09/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Harclerode, Barsa<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641             | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired           |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 20/60 Rpt: 23/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>08/20/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Harclerode, Barsa<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Harclerode, Barsa<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$85.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)                                |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Harclerode, Barsa<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)                                |
| Date<br>12/29/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Harclerode, Barsa<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)                                |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hargrave, Sandra<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757                     | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>none             |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>     |   | <b>1</b> Total pages Schedule A1:<br>Sch: 21/60 Rpt: 24/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women             |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>10/01/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hargrave, Sandra<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>none |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>12/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hauser, Ed<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78745                         | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Optician      |   | Employer (See Instructions)<br>Costco Warehouse            |
| Date<br>08/06/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hays, Jack<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                         | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired       |   | Employer (See Instructions)                                |
| Date<br>09/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hays, Jack<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                         | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired       |   | Employer (See Instructions)                                |
| Date<br>11/10/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hays, Jack<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                         | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired       |   | Employer (See Instructions)                                |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 22/60 Rpt: 25/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>08/07/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Heffernan, Mary<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78728 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.92        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>08/29/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Heffernan, Mary<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78728                   | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>10/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Heffernan, Mary<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78728                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>11/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Heffernan, Mary<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78728                   | Amount of Contribution (\$)<br><br>\$128.00                |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>11/05/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Heffernan, Mary<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78728                   | Amount of Contribution (\$)<br><br>\$115.00                |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 23/60 Rpt: 26/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>12/01/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Heffernan, Mary<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78728 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>12/29/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Heffernan, Mary<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78728                   | Amount of Contribution (\$)<br><br>\$55.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Herrera, Diane<br>Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Owner            |  | Employer (See Instructions)<br>CSSI Solutions              |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Herrera, Diane<br>Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$20.00                 |
| Principal occupation / Job title (See Instructions)<br>Owner            |  | Employer (See Instructions)<br>CSSI Solutions              |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Herrera, Diane<br>Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$60.00                 |
| Principal occupation / Job title (See Instructions)<br>Owner            |  | Employer (See Instructions)<br>CSSI Solutions              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>      |  | <b>1</b> Total pages Schedule A1:<br>Sch: 24/60 Rpt: 27/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women              |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>10/01/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Herrera, Diane<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Owner |  | <b>9</b> Employer (See Instructions)<br>CSSI Solutions     |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Herrera, Diane<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Owner          |  | Employer (See Instructions)<br>CSSI Solutions              |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hinkley, Nedra<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78717                    | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired        |  | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hinkley, Nedra<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78717                    | Amount of Contribution (\$)<br><br>\$35.00                 |
| Principal occupation / Job title (See Instructions)<br>retired        |  | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hinkley, Nedra<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78717                    | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired        |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 25/60 Rpt: 28/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/10/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hinkley, Nedra<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78717 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hinkley, Nedra<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78717                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hopkins, Perla<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                  | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Student Advocate |   | Employer (See Instructions)<br>Self                        |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hopkins, Perla<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                  | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Student Advocate |   | Employer (See Instructions)<br>Self                        |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hopkins, Perla<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                  | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Student Advocate |   | Employer (See Instructions)<br>Self                        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>                 |  | <b>1</b> Total pages Schedule A1:<br>Sch: 26/60 Rpt: 29/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                         |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/05/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hopkins, Perla<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641 | <b>7</b> Amount of Contribution (\$)<br><br>\$35.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Student Advocate |  | <b>9</b> Employer (See Instructions)<br>Self               |
| Date<br>11/10/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hopkins, Perla<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$15.00                 |
| Principal occupation / Job title (See Instructions)<br>Student Advocate          |  | Employer (See Instructions)<br>Self                        |
| Date<br>12/11/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hopkins, Perla<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$86.12                 |
| Principal occupation / Job title (See Instructions)<br>Student Advocate          |  | Employer (See Instructions)<br>Self                        |
| Date<br>08/06/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Huang, Guozhen<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78733                    | Amount of Contribution (\$)<br><br>\$35.00                 |
| Principal occupation / Job title (See Instructions)<br>Homemaker                 |  | Employer (See Instructions)<br>N/A                         |
| Date<br>09/10/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hutchinson-Hinderer, Lynda<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759        | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>retired                   |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 27/60 Rpt: 30/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>10/31/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hutchinson-Hinderer, Lynda<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>11/28/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hutchinson-Hinderer, Lynda<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                   | Amount of Contribution (\$)<br><br>\$52.13                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hutchinson-Hinderer, Lynda<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                   | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hutchinson-Hinderer, Lynda<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                   | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kaderli, Joan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78757                                | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 28/60 Rpt: 31/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>09/03/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kaderli, Joan<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kaderli, Joan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78757                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kaderli, Joan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78757                   | Amount of Contribution (\$)<br><br>\$85.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kaderli, Joan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78757                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>08/07/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kelly, Molly<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                    | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 29/60 Rpt: 32/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>08/06/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kelly, Molly<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kelly, Molly<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kelly, Molly<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Key, Leslie<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                    | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>09/19/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Key, Leslie<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                    | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 30/60 Rpt: 33/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/10/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Key, Leslie<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>12/04/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Key, Leslie<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                   | Amount of Contribution (\$)<br><br>\$154.00                |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Key, Leslie<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>12/22/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Key, Leslie<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>12/22/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Key, Leslie<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                   | Amount of Contribution (\$)<br><br>\$45.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 31/60 Rpt: 34/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>08/06/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Koehl, Ramona<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>11/24/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Koehl, Ramona<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                   | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Koehl, Ramona<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>11/28/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Koehl, Ramona<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                   | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Koehl, Ramona<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 32/60 Rpt: 35/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>09/03/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kurth, Charles<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kurth, Christina<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                 | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kurth, Christina<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                 | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kurth, Christina<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                 | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Lawler-Savitske, Janie<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78753           | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                            |  | <b>1</b> Total pages Schedule A1:<br>Sch: 33/60 Rpt: 36/84       |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743         |
| <b>4</b> Date<br>08/06/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Lehmann, Elaine<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78681 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00              |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Performing Arts Coordinator |  | <b>9</b> Employer (See Instructions)<br>Redeemer Lutheran Church |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Lehmann, Elaine<br><hr/> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78681                   | Amount of Contribution (\$)<br><br>\$50.00                       |
| Principal occupation / Job title (See Instructions)<br>Performing Arts Coordinator          |  | Employer (See Instructions)<br>Redeemer Lutheran Church          |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Lehmann, Elaine<br><hr/> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78681                   | Amount of Contribution (\$)<br><br>\$25.00                       |
| Principal occupation / Job title (See Instructions)<br>Performing Arts Coordinator          |  | Employer (See Instructions)<br>Redeemer Lutheran Church          |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Lehmann, Elaine<br><hr/> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78681                   | Amount of Contribution (\$)<br><br>\$25.00                       |
| Principal occupation / Job title (See Instructions)<br>Performing Arts Coordinator          |  | Employer (See Instructions)<br>Redeemer Lutheran Church          |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Lehmann, Elaine<br><hr/> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78681                   | Amount of Contribution (\$)<br><br>\$100.00                      |
| Principal occupation / Job title (See Instructions)<br>Performing Arts Coordinator          |  | Employer (See Instructions)<br>Redeemer Lutheran Church          |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>                            |  | <b>1</b> Total pages Schedule A1:<br>Sch: 34/60 Rpt: 37/84       |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743         |
| <b>4</b> Date<br>12/03/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Lehmann, Elaine<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78681 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00              |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Performing Arts Coordinator |  | <b>9</b> Employer (See Instructions)<br>Redeemer Lutheran Church |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Linn, Sue<br><hr/> Contributor address; City; State; Zip Code<br><br>Pflugerville, TX 78660                       | Amount of Contribution (\$)<br><br>\$25.00                       |
| Principal occupation / Job title (See Instructions)<br>retired                              |  | Employer (See Instructions)                                      |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Liu, Tina<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78746                             | Amount of Contribution (\$)<br><br>\$50.00                       |
| Principal occupation / Job title (See Instructions)<br>retired                              |  | Employer (See Instructions)                                      |
| Date<br>11/05/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Loua, Joel<br><hr/> Contributor address; City; State; Zip Code<br><br>Jacksonville, TX 75766                      | Amount of Contribution (\$)<br><br>\$10.00                       |
| Principal occupation / Job title (See Instructions)<br>campaign staff                       |  | Employer (See Instructions)                                      |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Lyle, Mary Karen<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                      | Amount of Contribution (\$)<br><br>\$42.00                       |
| Principal occupation / Job title (See Instructions)<br>compliance coordinator               |  | Employer (See Instructions)                                      |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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| <b>The Instruction Guide explains how to complete this form.</b>           |  | <b>1</b> Total pages Schedule A1:<br>Sch: 35/60 Rpt: 38/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>09/03/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Marcuso, Leah<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78750 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired    |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>08/06/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Martinez, Carine<br><hr/> Contributor address; City; State; Zip Code<br><br>dripping springs, TX 78620      | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Field director      |  | Employer (See Instructions)                                |
| Date<br>09/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Martinez, Carine<br><hr/> Contributor address; City; State; Zip Code<br><br>dripping springs, TX 78620      | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Field director      |  | Employer (See Instructions)                                |
| Date<br>12/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Martinez, Gloria<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78750                | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired             |  | Employer (See Instructions)                                |
| Date<br>08/06/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McDonald, Katharine<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641            | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Business Operations |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>                    |   | <b>1</b> Total pages Schedule A1:<br>Sch: 36/60 Rpt: 39/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                            |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>10/01/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McDonald, Katharine<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641 | <b>7</b> Amount of Contribution (\$)<br><br>\$35.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Business Operations |   | <b>9</b> Employer (See Instructions)<br>Dell               |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McDonald, Katharine<br>Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$20.00                 |
| Principal occupation / Job title (See Instructions)<br>Business Operations          |   | Employer (See Instructions)                                |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McGavern, Betty<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                        | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>homemaker                    |   | Employer (See Instructions)<br>self                        |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McGavern, Betty<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                        | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>homemaker                    |   | Employer (See Instructions)<br>self                        |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McGavern, Betty<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                        | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>homemaker                    |   | Employer (See Instructions)<br>self                        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 37/60 Rpt: 40/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>10/28/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McGavern, Betty<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759 | <b>7</b> Amount of Contribution (\$)<br><br>\$45.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>homemaker |  | <b>9</b> Employer (See Instructions)<br>self               |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McGavern, Betty<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                   | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>homemaker          |  | Employer (See Instructions)<br>self                        |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McGavern, Betty<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>homemaker          |  | Employer (See Instructions)<br>self                        |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Melugin, Joyce<br><hr/> Contributor address; City; State; Zip Code<br><br>Pflugerville, TX 78660              | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired            |  | Employer (See Instructions)                                |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Melugin, Joyce<br><hr/> Contributor address; City; State; Zip Code<br><br>Pflugerville, TX 78660              | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>retired            |  | Employer (See Instructions)                                |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 38/60 Rpt: 41/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>12/03/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Melugin, Joyce<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Pflugerville, TX 78660 | <b>7</b> Amount of Contribution (\$)<br><br>\$125.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Melugin, Joyce<br><hr/> Contributor address; City; State; Zip Code<br><br>Pflugerville, TX 78660                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>08/11/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Messinger, John<br><hr/> Contributor address; City; State; Zip Code<br><br>Pflugerville, TX 78660                  | Amount of Contribution (\$)<br><br>\$30.77                 |
| Principal occupation / Job title (See Instructions)<br>Prosecutor       |   | Employer (See Instructions)                                |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Messinger, John<br><hr/> Contributor address; City; State; Zip Code<br><br>Pflugerville, TX 78660                  | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Prosecutor       |   | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Messinger, John<br><hr/> Contributor address; City; State; Zip Code<br><br>Pflugerville, TX 78660                  | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Prosecutor       |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                  |  | <b>1</b> Total pages Schedule A1:<br>Sch: 39/60 Rpt: 42/84               |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                          |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743                 |
| <b>4</b> Date<br>09/03/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Moore, Judy<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78746 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00                      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>financial advisor |  | <b>9</b> Employer (See Instructions)<br>Self-Prospera Financial Services |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Moore, Judy<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78746                   | Amount of Contribution (\$)<br><br>\$25.00                               |
| Principal occupation / Job title (See Instructions)<br>financial advisor          |  | Employer (See Instructions)<br>Self-Prospera Financial Services          |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Moore, Judy<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78746                   | Amount of Contribution (\$)<br><br>\$55.00                               |
| Principal occupation / Job title (See Instructions)<br>financial advisor          |  | Employer (See Instructions)<br>Self-Prospera Financial Services          |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Moore, Judy<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78746                   | Amount of Contribution (\$)<br><br>\$25.00                               |
| Principal occupation / Job title (See Instructions)<br>financial advisor          |  | Employer (See Instructions)<br>Self-Prospera Financial Services          |
| Date<br>09/25/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Moore, Sarah<br><hr/> Contributor address; City; State; Zip Code<br><br>Libreerty Hill, TX 78642          | Amount of Contribution (\$)<br><br>\$30.77                               |
| Principal occupation / Job title (See Instructions)<br>attorney                   |  | Employer (See Instructions)  |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>         |   | <b>1</b> Total pages Schedule A1:<br>Sch: 40/60 Rpt: 43/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                 |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/13/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Moore, Sarah<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Libreerty Hill, TX 78642 | <b>7</b> Amount of Contribution (\$)<br><br>\$27.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>attorney |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>09/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Morea, Lois<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                            | Amount of Contribution (\$)<br><br>\$5.00                  |
| Principal occupation / Job title (See Instructions)<br>retired           |   | Employer (See Instructions)                                |
| Date<br>09/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Morea, Lois<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                            | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired           |   | Employer (See Instructions)                                |
| Date<br>11/10/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Morea, Lois<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                            | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>retired           |   | Employer (See Instructions)                                |
| Date<br>12/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Morea, Lois<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                            | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>retired           |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>   |   | <b>1</b> Total pages Schedule A1:<br>Sch: 41/60 Rpt: 44/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women           |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>08/06/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Morrow, Gloria<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>RN |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>09/04/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Mushtaler, Jen<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                   | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>physician   |   | Employer (See Instructions)                                |
| Date<br>10/01/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Mushtaler, Jen<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                   | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>physician   |   | Employer (See Instructions)                                |
| Date<br>08/06/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Nardiello, Eulonda<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78729               | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired     |   | Employer (See Instructions)                                |
| Date<br>11/10/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Nardiello, Eulonda<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78729               | Amount of Contribution (\$)<br><br>\$85.00                 |
| Principal occupation / Job title (See Instructions)<br>retired     |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 42/60 Rpt: 45/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/10/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Nardiello, Eulonda<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78729 | <b>7</b> Amount of Contribution (\$)<br><br>\$20.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Nardiello, Eulonda<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78729                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Nardiello, Eulonda<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78729                   | Amount of Contribution (\$)<br><br>\$26.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Nardiello, Eulonda<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78729                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>08/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Navarro, Selma<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                       | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 43/60 Rpt: 46/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>09/02/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Navarro, Selma<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78758 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>09/29/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Navarro, Selma<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Navarro, Selma<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                   | Amount of Contribution (\$)<br><br>\$90.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Navarro, Selma<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                   | Amount of Contribution (\$)<br><br>\$25.98                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>12/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Navarro, Selma<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 44/60 Rpt: 47/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>08/29/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Naylor, Nancy<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.92        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Neal, Carol<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                     | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>grant writer     |  | Employer (See Instructions)<br>self                        |
| Date<br>11/05/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Neal, Carol<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                     | Amount of Contribution (\$)<br><br>\$97.43                 |
| Principal occupation / Job title (See Instructions)<br>grant writer     |  | Employer (See Instructions)<br>self                        |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Neal, Carol<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                     | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>grant writer     |  | Employer (See Instructions)<br>self                        |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Neal, Carol<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                     | Amount of Contribution (\$)<br><br>\$115.00                |
| Principal occupation / Job title (See Instructions)<br>grant writer     |  | Employer (See Instructions)<br>self                        |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 45/60 Rpt: 48/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                     |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>12/03/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Neal, Carol<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>grant writer |  | <b>9</b> Employer (See Instructions)<br>self               |
| Date<br>08/06/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Neff, Cheryl<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78717                  | Amount of Contribution (\$)<br><br>\$20.00                 |
| Principal occupation / Job title (See Instructions)<br>Realtor               |  | Employer (See Instructions)<br>Self                        |
| Date<br>09/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Neff, Cheryl<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78717                  | Amount of Contribution (\$)<br><br>\$20.00                 |
| Principal occupation / Job title (See Instructions)<br>Realtor               |  | Employer (See Instructions)<br>Self                        |
| Date<br>10/01/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Neff, Cheryl<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78717                  | Amount of Contribution (\$)<br><br>\$20.00                 |
| Principal occupation / Job title (See Instructions)<br>Realtor               |  | Employer (See Instructions)<br>Self                        |
| Date<br>12/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Neff, Cheryl<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78717                  | Amount of Contribution (\$)<br><br>\$20.00                 |
| Principal occupation / Job title (See Instructions)<br>Realtor               |  | Employer (See Instructions)<br>Self                        |



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 46/60 Rpt: 49/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>12/03/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Neff, Cheryl<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78717 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Realtor |   | <b>9</b> Employer (See Instructions)<br>Self               |
| Date<br>12/12/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Neff, Cheryl<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78717                   | Amount of Contribution (\$)<br><br>\$121.00                |
| Principal occupation / Job title (See Instructions)<br>Realtor          |   | Employer (See Instructions)<br>Self                        |
| Date<br>07/07/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>O'Leary, Louri<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                 | Amount of Contribution (\$)<br><br>\$27.00                 |
| Principal occupation / Job title (See Instructions)<br>Administrator    |   | Employer (See Instructions)<br>TFRW                        |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>O'Leary, Louri<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                 | Amount of Contribution (\$)<br><br>\$20.00                 |
| Principal occupation / Job title (See Instructions)<br>Administrator    |   | Employer (See Instructions)<br>TFRW                        |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>O'Leary, Louri<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                 | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Administrator    |   | Employer (See Instructions)<br>TFRW                        |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>              |   | <b>1</b> Total pages Schedule A1:<br>Sch: 47/60 Rpt: 50/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                      |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/04/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>O'Leary, Louri<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731 | <b>7</b> Amount of Contribution (\$)<br><br>\$86.12        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Administrator |   | <b>9</b> Employer (See Instructions)<br>TFRW               |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>O'Leary, Louri<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Administrator          |   | Employer (See Instructions)<br>TFRW                        |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>O'Leary, Louri<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                   | Amount of Contribution (\$)<br><br>\$20.00                 |
| Principal occupation / Job title (See Instructions)<br>Administrator          |   | Employer (See Instructions)<br>TFRW                        |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>O'Leary, Louri<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                   | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Administrator          |   | Employer (See Instructions)<br>TFRW                        |
| Date<br>12/29/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>O'Leary, Louri<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                   | Amount of Contribution (\$)<br><br>\$10.38                 |
| Principal occupation / Job title (See Instructions)<br>Administrator          |   | Employer (See Instructions)<br>TFRW                        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>          |   | <b>1</b> Total pages Schedule A1:<br>Sch: 48/60 Rpt: 51/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>09/03/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Owren, Sherilyn<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired   |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>11/24/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Owren, Sherilyn<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$89.00                 |
| Principal occupation / Job title (See Instructions)<br>retired            |   | Employer (See Instructions)                                |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Owren, Sherilyn<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$70.00                 |
| Principal occupation / Job title (See Instructions)<br>retired            |   | Employer (See Instructions)                                |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Owren, Sherilyn<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired            |   | Employer (See Instructions)                                |
| Date<br>09/22/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pantalion-Parker, Kathryn<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641         | Amount of Contribution (\$)<br><br>\$25.92                 |
| Principal occupation / Job title (See Instructions)<br>fashion consultant |   | Employer (See Instructions)<br>self                        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>                   |   | <b>1</b> Total pages Schedule A1:<br>Sch: 49/60 Rpt: 52/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                           |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/10/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pantalion-Parker, Kathryn<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>fashion consultant |   | <b>9</b> Employer (See Instructions)<br>self               |
| Date<br>12/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pantalion-Parker, Kathryn<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>fashion consultant          |   | Employer (See Instructions)<br>self                        |
| Date<br>12/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pantalion-Parker, Kathryn<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>fashion consultant          |   | Employer (See Instructions)<br>self                        |
| Date<br>11/28/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Park, Suzie<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78729                                  | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>DIYer                       |   | Employer (See Instructions)<br>self                        |
| Date<br>11/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Penn, Deborah<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78736                                | Amount of Contribution (\$)<br><br>\$27.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired                     |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 50/60 Rpt: 53/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/10/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Purcell, Peggi (Margaret)<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78719 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>09/29/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Railey, James<br><hr/> Contributor address; City; State; Zip Code<br><br>austin, TX 78734                               | Amount of Contribution (\$)<br><br>\$27.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>10/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Railey, James<br><hr/> Contributor address; City; State; Zip Code<br><br>austin, TX 78734                               | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rattan, Pam<br><hr/> Contributor address; City; State; Zip Code<br><br>austin, TX 78729                                 | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rattan, Pam<br><hr/> Contributor address; City; State; Zip Code<br><br>austin, TX 78729                                 | Amount of Contribution (\$)<br><br>\$35.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 51/60 Rpt: 54/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/10/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rattan, Pam<br><b>6</b> Contributor address; City; State; Zip Code<br><br>austin, TX 78729 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rattan, Pam<br>Contributor address; City; State; Zip Code<br><br>austin, TX 78729                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>08/07/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rightmyer, Kathryn<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78750            | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rightmyer, Kathryn<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78750            | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rightmyer, Kathryn<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78750            | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 52/60 Rpt: 55/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                     |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/10/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rightmyer, Kathryn<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78750 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired      |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>12/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rightmyer, Kathryn<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78750                   | Amount of Contribution (\$)<br><br>\$40.00                 |
| Principal occupation / Job title (See Instructions)<br>retired               |   | Employer (See Instructions)                                |
| Date<br>12/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rightmyer, Kathryn<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78750                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired               |   | Employer (See Instructions)                                |
| Date<br>11/10/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Robertson, Evelyn (Dr.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641             | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Management Consultant |   | Employer (See Instructions)<br>Robertson and Assoc.        |
| Date<br>12/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Robertson, Evelyn (Dr.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641             | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Management Consultant |   | Employer (See Instructions)<br>Robertson and Assoc.        |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 53/60 Rpt: 56/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>10/21/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rodriguez, Marilyn<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78758 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rodriguez, Marilyn<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)                                |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Russell, Susan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                       | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Russell, Susan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                       | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Russell, Susan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                       | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 54/60 Rpt: 57/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>10/28/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Russell, Susan<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759 | <b>7</b> Amount of Contribution (\$)<br><br>\$135.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Russell, Susan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Russell, Susan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sage, Barbara<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78633                    | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>CPA              |   | Employer (See Instructions)<br>Self                        |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sage, Barbara<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78633                    | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>CPA              |   | Employer (See Instructions)<br>Self                        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>    |  | <b>1</b> Total pages Schedule A1:<br>Sch: 55/60 Rpt: 58/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women            |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>12/03/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sage, Barbara<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78633 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>CPA |  | <b>9</b> Employer (See Instructions)<br>Self               |
| Date<br>12/12/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sage, Barbara<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78633                   | Amount of Contribution (\$)<br><br>\$89.00                 |
| Principal occupation / Job title (See Instructions)<br>CPA          |  | Employer (See Instructions)<br>Self                        |
| Date<br>08/27/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Scott, Jeanie<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                   | Amount of Contribution (\$)<br><br>\$25.92                 |
| Principal occupation / Job title (See Instructions)<br>retired      |  | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sellars, Susan<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78752                  | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired      |  | Employer (See Instructions)                                |
| Date<br>10/28/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sellars, Susan<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78752                  | Amount of Contribution (\$)<br><br>\$35.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired      |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 56/60 Rpt: 59/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/10/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sellars, Susan<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78752 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sellars, Susan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78752                   | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)                                |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sellars, Susan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78752                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Smith, Shelley<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78734                   | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Smith, Shelley<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78734                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 57/60 Rpt: 60/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>12/03/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Smith, Shelley<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78734 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Spataro, Susan<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78749                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)                                |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Stewart, Velma<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78727                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |
| Date<br>10/28/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>TFRW<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78750                             | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)                     |   | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Taylor, Allison<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                  | Amount of Contribution (\$)<br><br>\$35.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 58/60 Rpt: 61/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/10/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Taylor, Allison<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>12/29/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Tollen, Victoria<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78746                  | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Wadlington, Elizabeth<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731             | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |  | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Wadlington, Elizabeth<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731             | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |  | Employer (See Instructions)                                |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Webster, Kathleen<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                 | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 59/60 Rpt: 62/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>09/03/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Webster, Kathleen<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78758 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Webster, Kathleen<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                   | Amount of Contribution (\$)<br><br>\$85.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |  | Employer (See Instructions)                                |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Webster, Kathleen<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |  | Employer (See Instructions)                                |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Webster, Kathleen<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |  | Employer (See Instructions)                                |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Webster, Kathleen<br>Contributor address; City; State; Zip Code<br><br>Austin, TX 78758                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>              |  | <b>1</b> Total pages Schedule A1:<br>Sch: 60/60 Rpt: 63/84 |
| <b>2</b> FILER NAME<br>Northwest Austin Republican Women                      |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>08/06/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Weikert, Carrie<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>realtor       |  | <b>9</b> Employer (See Instructions)<br>Coldwell Banker    |
| Date<br>10/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Weikert, Carrie<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>realtor                |  | Employer (See Instructions)<br>Coldwell Banker             |
| Date<br>08/06/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Wu, Pearl<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78746                         | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>retired                |  | Employer (See Instructions)                                |
| Date<br>09/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Yelaun, Anna<br><hr/> Contributor address; City; State; Zip Code<br><br>Leander, TX 78641                     | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Teacher/State Director |  | Employer (See Instructions)                                |
| Date<br>10/02/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>arceneaux, austin<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77043                | Amount of Contribution (\$)<br><br>\$54.00                 |
| Principal occupation / Job title (See Instructions)<br>lege staff             |  | Employer (See Instructions)                                |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

|  |  |  |  |
|--|--|--|--|
| The Instruction Guide explains how to complete this form.                                      |  | 1 Total pages Schedule A2:<br>Sch: 1/1 Rpt: 64/84            |  |
| 2 FILER NAME<br>Northwest Austin Republican Women  |  | 3 Filer ID (Ethics Commission Filers)<br>00015743            |  |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS  |  | \$   |  |
| 5 Date<br>08/16/2025   | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cocco, Cathy (Mrs.)<br>7 Contributor address; City; State; Zip Code<br><br>Austin, TX 78759 | 8 Amount of contribution (\$)<br>\$40.00                     | 9 In-kind contribution description<br>lapel pins |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)<br>Marketing Manager |  | 11 Employer (FOR NON-JUDICIAL) (See instructions)<br>IBM     |  |
| 12 Contributor's principal occupation (FOR JUDICIAL)   |  | 13 Contributor's job title (FOR JUDICIAL) (See instructions) |  |
| 14 Contributor's employer/law firm (FOR JUDICIAL)  |  | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)  |  |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)                    |  |  |  |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/20 Rpt: 65/84  | <b>2</b> FILER NAME<br>Northwest Austin Republican Women  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>08/14/2025  | <b>5</b> Payee name<br>BC Trophies  |  |
| <b>6</b> Amount (\$)<br>\$38.97<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>715 Discovery Blvd<br>Ste. 403<br>Austin, TX 78613 |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                     | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>name tags      |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              |   |  |
| Date<br>08/11/2025   | Candidate/Officeholder name<br>Office sought<br>Office held   |  |
| Payee name<br>Balcones Country Club  |   |  |
| Amount (\$)<br>\$1,345.64<br><br><input type="checkbox"/> Expenditure from corporate funds       | Payee address; City; State; Zip Code<br>8600 Balcones Club Dr<br>Austin, TX 78750                   |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Lunch meeting expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |   |  |
| Date<br>10/01/2025   | Candidate/Officeholder name<br>Office sought<br>Office held   |  |
| Payee name<br>Balcones Country Club  |   |  |
| Amount (\$)<br>\$1,070.50<br><br><input type="checkbox"/> Expenditure from corporate funds       | Payee address; City; State; Zip Code<br>8600 Balcones Club Dr<br>Austin, TX 78750                   |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Lunch meeting         |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 2/20 Rpt: 66/84   | <b>2</b> FILER NAME<br>Northwest Austin Republican Women                                       | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743  |
| <b>4</b> Date<br>09/04/2025   | <b>5</b> Payee name<br>Balcones Country Club   |   |
| <b>6</b> Amount (\$)<br>\$1,075.49<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>8600 Balcones Club Dr<br><br>Austin, TX 78750 |   |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense       | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>monthly lunch meeting     |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                 |  |   |
| Date<br>11/06/2025  | Candidate/Officeholder name Office sought Office held  |   |
| Payee name<br>Balcones Country Club   |  |   |
| Amount (\$)<br>\$1,365.65<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>8600 Balcones Club Dr<br><br>Austin, TX 78750          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense              | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>November membership meeting      |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  |  |   |
| Date<br>12/04/2025  | Candidate/Officeholder name Office sought Office held  |   |
| Payee name<br>Balcones Country Club   |  |   |
| Amount (\$)<br>\$1,280.65<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>8600 Balcones Club Dr<br><br>Austin, TX 78750          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense              | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Monthly membership lunch meeting |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  |  |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 3/20 Rpt: 67/84  | <b>2</b> FILER NAME<br>Northwest Austin Republican Women  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>07/30/2025  | <b>5</b> Payee name<br>Cocco, Cathy   |  |
| <b>6</b> Amount (\$)<br>\$30.00<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br><br><b>REDACTED PER 254.0401, ELEC. CODE</b><br>Austin, TX 78759 |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Refund lunch payment                   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Refund lunch payment               |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>08/13/2025   | Payee name<br>Costco  |  |
| Amount (\$)<br>\$21.63<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>1901 Kelly Ln<br><br>Pflugerville, TX 78660                               |  |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense                       | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>cardstock for printing directories |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>07/01/2025   | Payee name<br>DigitalOcean.com  |  |
| Amount (\$)<br>\$4.26<br><br><input type="checkbox"/> Expenditure from corporate funds           | Payee address; City; State; Zip Code<br>101 6th Ave.<br><br>New York, NY 10013                                    |  |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense         | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>website                            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name   | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 4/20 Rpt: 68/84                                       | <b>2</b> FILER NAME<br>Northwest Austin Republican Women  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743  |
| <b>4</b> Date<br>08/01/2025   | <b>5</b> Payee name<br>DigitalOcean.com   |   |
| <b>6</b> Amount (\$)<br>\$4.26<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>101 6th Ave.<br><br>New York, NY 10013                   |   |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>website     |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                             |   |   |
| Date<br>09/02/2025  | Candidate/Officeholder name<br>Office sought<br>Office held   |   |
| Payee name<br>DigitalOcean.com  |   |   |
| Amount (\$)<br>\$4.26<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>101 6th Ave.<br><br>New York, NY 10013                            |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                           | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>website fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                      |   |   |
| Date<br>10/01/2025  | Candidate/Officeholder name<br>Office sought<br>Office held   |   |
| Payee name<br>DigitalOcean.com  |   |   |
| Amount (\$)<br>\$4.26<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>101 6th Ave.<br><br>New York, NY 10013                            |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>website     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                      |   |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 5/20 Rpt: 69/84                                       | <b>2</b> FILER NAME<br>Northwest Austin Republican Women  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/03/2025   | <b>5</b> Payee name<br>DigitalOcean.com   |  |
| <b>6</b> Amount (\$)<br>\$4.26<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>101 6th Ave.<br><br>New York, NY 10013                   |  |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>website hosting                            |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                             | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>12/01/2025  | Payee name<br>DigitalOcean.com  |  |
| Amount (\$)<br>\$4.26<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>101 6th Ave.<br><br>New York, NY 10013                            |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>website hosting fee                               |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                      | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>08/15/2025  | Payee name<br>Dollar Tree   |  |
| Amount (\$)<br>\$8.12<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>13096 HWY 183<br>Suite 103<br>Austin, TX 78750                    |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>paper plates, napkins, cups for new member social |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                      | Candidate/Officeholder name   | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |  |   |
|--|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 6/20 Rpt: 70/84  | <b>2</b> FILER NAME<br>Northwest Austin Republican Women   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743  |
| <b>4</b> Date<br>12/16/2025  | <b>5</b> Payee name<br>Dollar Tree   |   |
| <b>6</b> Amount (\$)<br>\$19.49<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>13096 HWY 183<br>Suite 103<br>Austin, TX 78750      |   |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense             | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>President's Circle event supplies |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              |  |   |
| Date<br>08/08/2025   | Candidate/Officeholder name<br>Gontko, Carol   |   |
| Amount (\$)<br>\$52.00<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br><b>REDACTED PER 254.0401, ELEC. CODE</b><br>Austin, TX 78726 |   |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                      | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>refunded duplicate payment        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |  |   |
| Date<br>09/05/2025   | Candidate/Officeholder name<br>HEB   |   |
| Amount (\$)<br>\$31.38<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>12860 Research Blvd<br>Austin, TX 78750                      |   |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense             | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>new member orientation supplies   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |  |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |   |   |
|--|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 7/20 Rpt: 71/84  | <b>2</b> FILER NAME<br>Northwest Austin Republican Women  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743  |
| <b>4</b> Date<br>12/16/2025  | <b>5</b> Payee name<br>HEB  |   |
| <b>6</b> Amount (\$)<br>\$81.25<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>12860 Research Blvd<br><br>Austin, TX 78750  |   |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>President's Circle event supplies           |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              |   |   |
| Date<br>12/26/2025   | Candidate/Officeholder name<br>Heffernan, Mary  |   |
| Amount (\$)<br>\$152.00<br><br><input type="checkbox"/> Expenditure from corporate funds         | Payee address; City; State; Zip Code<br><div style="background-color: black; color: white; text-align: center; padding: 2px;">REDACTED PER 254.0401, ELEC. CODE</div><br>Austin, TX 78728 |   |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Jewelry - fundraiser                        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |   |   |
| Date<br>12/18/2025   | Candidate/Officeholder name<br>Jason's Deli   |   |
| Amount (\$)<br>\$196.95<br><br><input type="checkbox"/> Expenditure from corporate funds         | Payee address; City; State; Zip Code<br>10225 Research Blvd<br><br>Austin, TX 78759   |   |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Food/beverages for President's Circle event |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |   |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 8/20 Rpt: 72/84  | <b>2</b> FILER NAME<br>Northwest Austin Republican Women  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>09/25/2025  | <b>5</b> Payee name<br>Lake Creek Office Park   |  |
| <b>6</b> Amount (\$)<br>\$50.00<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>13740 N Highway 183<br><br>Austin, TX 78750              |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>meeting room rental                      |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              |   |  |
| Date<br>09/16/2025   | Candidate/Officeholder name<br>Office sought<br>Office held   |  |
| Payee name<br>Lake Creek Office Park   |   |  |
| Amount (\$)<br>\$50.00<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>13740 N Highway 183<br><br>Austin, TX 78750                       |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>meeting room rental                             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |   |  |
| Date<br>08/26/2025   | Candidate/Officeholder name<br>Office sought<br>Office held   |  |
| Payee name<br>Liberty Lives Forever  |   |  |
| Amount (\$)<br>\$270.97<br><br><input type="checkbox"/> Expenditure from corporate funds         | Payee address; City; State; Zip Code<br>55 Spring Terrace Court<br><br>St. Charles, MO 63303              |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>250 Constitutions for donation to local schools |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |   |  |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 9/20 Rpt: 73/84  | <b>2</b> FILER NAME<br>Northwest Austin Republican Women   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>08/12/2025  | <b>5</b> Payee name<br>National Federation of Republican Women   |  |
| <b>6</b> Amount (\$)<br>\$50.00<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>124 N. Alfred Street<br><br>Alexandria, VA 22314        |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Federation Fund donation |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              |  |  |
| Date<br>08/12/2025   | Candidate/Officeholder name<br>Office sought<br>Office held  |  |
| Payee name<br>National Federation of Republican Women  |  |  |
| Amount (\$)<br>\$50.00<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>124 N. Alfred Street<br><br>Alexandria, VA 22314                 |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Marion Martin Fund donation     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |  |  |
| Date<br>08/13/2025   | Candidate/Officeholder name<br>Office sought<br>Office held  |  |
| Payee name<br>Office Depot   |  |  |
| Amount (\$)<br>\$292.46<br><br><input type="checkbox"/> Expenditure from corporate funds         | Payee address; City; State; Zip Code<br>Stone Hill Center<br><br>Pflugerville, TX 78660                  |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Printing Expense                     | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>paper for directories           |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |  |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |  |   |
|--|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 10/20 Rpt: 74/84                                       | <b>2</b> FILER NAME<br>Northwest Austin Republican Women   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743  |
| <b>4</b> Date<br>12/08/2025  | <b>5</b> Payee name<br>Sam's Club  |   |
| <b>6</b> Amount (\$)<br>\$40.07<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>9700 N Capital Of Texas Hwy<br><br>Austin, TX 78759 |   |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense             | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>President's Circle event supplies |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              |  |   |
| Date<br>07/14/2025   | Candidate/Officeholder name<br>Office sought<br>Office held  |   |
| Payee name<br>Square Weebly  |  |   |
| Amount (\$)<br>\$3.10<br><br><input type="checkbox"/> Expenditure from corporate funds           | Payee address; City; State; Zip Code<br>1455 Market St.<br>Suite 600<br>San Francisco, CA 94103      |   |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                      | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>payment processing fee            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |  |   |
| Date<br>10/02/2025   | Candidate/Officeholder name<br>Office sought<br>Office held  |   |
| Payee name<br>Square Weebly  |  |   |
| Amount (\$)<br>\$4.18<br><br><input type="checkbox"/> Expenditure from corporate funds           | Payee address; City; State; Zip Code<br>1455 Market St.<br>Suite 600<br>San Francisco, CA 94103      |   |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking        | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>payment processing fee            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |  |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 11/20 Rpt: 75/84                                      | <b>2</b> FILER NAME<br>Northwest Austin Republican Women   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/06/2025   | <b>5</b> Payee name<br>Square Weebly   |  |
| <b>6</b> Amount (\$)<br>\$4.01<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>1455 Market St.<br>Suite 600<br>San Francisco, CA 94103                           |  |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking                                      | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>payment processing fee |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                             |  |  |
| Date<br>11/03/2025  | Candidate/Officeholder name Office sought Office held  |  |
| Amount (\$)<br>\$1.08<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee name<br>Square Weebly<br><br>Payee address; City; State; Zip Code<br>1455 Market St.<br>Suite 600<br>San Francisco, CA 94103 |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>payment processing fee        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                      |  |  |
| Date<br>11/24/2025  | Candidate/Officeholder name Office sought Office held  |  |
| Amount (\$)<br>\$2.16<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee name<br>Square Weebly<br><br>Payee address; City; State; Zip Code<br>1455 Market St.<br>Suite 600<br>San Francisco, CA 94103 |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>payment processing fee        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                      |  |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 12/20 Rpt: 76/84                                      | <b>2</b> FILER NAME<br>Northwest Austin Republican Women   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/24/2025   | <b>5</b> Payee name<br>Square Weebly   |  |
| <b>6</b> Amount (\$)<br>\$2.88<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>1455 Market St.<br>Suite 600<br>San Francisco, CA 94103 |  |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>pmt processing fee |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                             | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>11/21/2025  | Payee name<br>Square Weebly  |  |
| Amount (\$)<br>\$1.08<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>1455 Market St.<br>Suite 600<br>San Francisco, CA 94103          |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking                   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>pmt processing fee        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                      | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>11/20/2025  | Payee name<br>Square Weebly  |  |
| Amount (\$)<br>\$2.88<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>1455 Market St.<br>Suite 600<br>San Francisco, CA 94103          |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking                   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>pmt processing fee        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                      | Candidate/Officeholder name  | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 13/20 Rpt: 77/84                                      | <b>2</b> FILER NAME<br>Northwest Austin Republican Women   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/13/2025   | <b>5</b> Payee name<br>Square Weebly   |  |
| <b>6</b> Amount (\$)<br>\$1.08<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>1455 Market St.<br>Suite 600<br>San Francisco, CA 94103 |  |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>pmt processing fee |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                             | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>12/04/2025  | Payee name<br>Square Weebly  |  |
| Amount (\$)<br>\$7.65<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>1455 Market St.<br>Suite 600<br>San Francisco, CA 94103          |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking                   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Payment processing fee    |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                      | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>12/19/2025  | Payee name<br>Square Weebly  |  |
| Amount (\$)<br>\$6.99<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>1455 Market St.<br>Suite 600<br>San Francisco, CA 94103          |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking                   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>payment processing fee    |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                      | Candidate/Officeholder name  | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 14/20 Rpt: 78/84                                      | <b>2</b> FILER NAME<br>Northwest Austin Republican Women   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>12/08/2025   | <b>5</b> Payee name<br>Square Weebly   |  |
| <b>6</b> Amount (\$)<br>\$3.17<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>1455 Market St.<br>Suite 600<br>San Francisco, CA 94103 |  |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>payment processing fee |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                             | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/24/2025  | Payee name<br>Square Weebly  |  |
| Amount (\$)<br>\$2.16<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>1455 Market St.<br>Suite 600<br>San Francisco, CA 94103          |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking                   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>payment processing fee        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                      | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>09/29/2025  | Payee name<br>Square Weebly  |  |
| Amount (\$)<br>\$2.31<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>1455 Market St.<br>Suite 600<br>San Francisco, CA 94103          |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking                   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>pmt proc fee                  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                      | Candidate/Officeholder name  | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 15/20 Rpt: 79/84                                       | <b>2</b> FILER NAME<br>Northwest Austin Republican Women                                     | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>11/06/2025  | <b>5</b> Payee name<br>TFRW  |  |
| <b>6</b> Amount (\$)<br>\$20.20<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>P.O.Box 171146<br><br>Austin, TX 78217-8165 |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees              | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>annual club fee for 2026 |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>11/06/2025   | Payee name<br>TFRW   |  |
| Amount (\$)<br>\$430.10<br><br><input type="checkbox"/> Expenditure from corporate funds         | Payee address; City; State; Zip Code<br>P.O.Box 171146<br><br>Austin, TX 78217-8165          |  |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees              | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>member dues for 2026     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>11/21/2025   | Payee name<br>TFRW   |  |
| Amount (\$)<br>\$253.00<br><br><input type="checkbox"/> Expenditure from corporate funds         | Payee address; City; State; Zip Code<br>P.O.Box 171146<br><br>Austin, TX 78217-8165          |  |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees              | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Membership dues          |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name  | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 16/20 Rpt: 80/84  | <b>2</b> FILER NAME<br>Northwest Austin Republican Women  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743  |
| <b>4</b> Date<br>12/22/2025   | <b>5</b> Payee name<br>TFRW   |   |
| <b>6</b> Amount (\$)<br>\$507.50<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>13740 N HWY 183<br>Ste J-4<br>Austin, TX 78750 |   |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                 | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Club Gold patron 2026 |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                               | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>12/29/2025  | Payee name<br>TFRW  |   |
| Amount (\$)<br>\$404.80<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>13740 N HWY 183<br>Ste J-4<br>Austin, TX 78750          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Fees                        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Member dues                  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>07/03/2025  | Payee name<br>Texas Comptroller   |   |
| Amount (\$)<br>\$3.79<br><br><input type="checkbox"/> Expenditure from corporate funds            | Payee address; City; State; Zip Code<br>111 E. 17th St.<br>Austin, TX 78774                     |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Fees                        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>sales tax                    |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought Office held   |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

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|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 17/20 Rpt: 81/84                                       | <b>2</b> FILER NAME<br>Northwest Austin Republican Women                                   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>12/03/2025  | <b>5</b> Payee name<br>Texas Comptroller   |  |
| <b>6</b> Amount (\$)<br>\$52.00<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>111 E. 17th St.<br><br>Austin, TX 78774   |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>late reporting fee Q3          |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              |  |  |
| Date<br>08/14/2025   | Candidate/Officeholder name<br>Office sought<br>Office held                                |  |
| Payee name<br>Texas Federation of Republican Women PAC   |  |  |
| Amount (\$)<br>\$278.30<br><br><input type="checkbox"/> Expenditure from corporate funds         | Payee address; City; State; Zip Code<br>13740 N Highway 183<br>J4<br>Austin, TX 78750-1832 |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Fees                   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Dues                                  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |  |  |
| Date<br>08/29/2025   | Candidate/Officeholder name<br>Office sought<br>Office held                                |  |
| Payee name<br>Texas Federation of Republican Women PAC   |  |  |
| Amount (\$)<br>\$50.00<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>13740 N Highway 183<br>J4<br>Austin, TX 78750-1832 |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>hospitality donation (meeting snacks) |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |  |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 18/20 Rpt: 82/84                                       | <b>2</b> FILER NAME<br>Northwest Austin Republican Women   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>08/19/2025  | <b>5</b> Payee name<br>Texas Federation of Republican Women PAC  |  |
| <b>6</b> Amount (\$)<br>\$20.00<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>13740 N Highway 183<br>J4<br>Austin, TX 78750-1832  |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donation to general scholarship fund |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              |  |  |
| Date<br>08/19/2025   | Candidate/Officeholder name<br>Office sought<br>Office held  |  |
| Amount (\$)<br>\$10.00<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee name<br>Texas Federation of Republican Women PAC<br><br>Payee address; City; State; Zip Code<br>13740 N Highway 183<br>J4<br>Austin, TX 78750-1832 |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donation to Beryl Dowd scholarship fund     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |  |  |
| Date<br>12/17/2025   | Payee name<br>Trader Joe's   |  |
| Amount (\$)<br>\$40.81<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>9722 Great Hills Trail<br><br>Austin, TX 78759   |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Food/beverages for President's Circle event |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |  |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 19/20 Rpt: 83/84                                       | <b>2</b> FILER NAME<br>Northwest Austin Republican Women  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743   |
| <b>4</b> Date<br>08/15/2025  | <b>5</b> Payee name<br>US Post Office   |  |
| <b>6</b> Amount (\$)<br>\$31.20<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>10109 Lake Creek Pkwy<br><br>Austin, TX 78729            |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>stamps for corresponding secretary               |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              |   |  |
| Date<br>08/13/2025   | Candidate/Officeholder name<br>US Post Office   |  |
| Amount (\$)<br>\$8.12<br><br><input type="checkbox"/> Expenditure from corporate funds           | Payee address; City; State; Zip Code<br>10109 Lake Creek Pkwy<br><br>Austin, TX 78729                     |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>postage   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |   |  |
| Date<br>09/17/2025   | Candidate/Officeholder name<br>US Post Office   |  |
| Amount (\$)<br>\$24.40<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>10109 Lake Creek Pkwy<br><br>Austin, TX 78729                     |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>stamps for corresponding secretary - reimbursed Kaderli |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       |   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |  |   |
|--|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 20/20 Rpt: 84/84                                       | <b>2</b> FILER NAME<br>Northwest Austin Republican Women   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00015743  |
| <b>4</b> Date<br>12/17/2025  | <b>5</b> Payee name<br>WB Liquors  |   |
| <b>6</b> Amount (\$)<br>\$15.14<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>10401 Research Blvd<br><br>Austin, TX 78759     |   |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Food/beverages for President's Circle event |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>08/13/2025   | Payee name<br>Walmart  |   |
| Amount (\$)<br>\$15.91<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>2701 S IH 35<br><br>Round Rock, TX 78664                 |   |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense      | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Supplies for printing directories           |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>08/27/2025   | Payee name<br>Walmart  |   |
| Amount (\$)<br>\$5.93<br><br><input type="checkbox"/> Expenditure from corporate funds           | Payee address; City; State; Zip Code<br>2701 S IH 35<br><br>Round Rock, TX 78664                 |   |
| PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense         | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>supplies for new member social              |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name  | Office sought Office held   |