

**GENERAL-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM GPAC
COVER SHEET PG 1**

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00015597	2 Total pages filed: 164			
3 COMMITTEE NAME Bexar County Republican Women PAC		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/11/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged				
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address 13423 Blanco Rd #317 San Antonio, TX 78216						
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.			FIRST Theresa S.	MI	
	NICKNAME Terri	LAST Richardson	SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 23504 Lori Way San Antonio, TX 78258		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 23504 Lori Way San Antonio, TX 78258					
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 264-9813					
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff					
10 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
11 ELECTION	ELECTION DATE Month 03/03/2026	Day	Year	Primary <input checked="" type="checkbox"/>	Runoff <input type="checkbox"/>	Other <input type="checkbox"/>
				General <input type="checkbox"/>	Special <input type="checkbox"/>	

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

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Bexar County Republican Women PAC		13 FILER ID (Ethics Commission Filers) 00015597
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Republican B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 346.75
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 33,704.75
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 33,245.76
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 23,269.32
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
16 AFFIDAVIT		
<p>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.</p> <p style="text-align: right;">_____ Mrs. Theresa S. Richardson _____ Signature of Campaign Treasurer</p>		
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
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17 COMMITTEE NAME Bexar County Republican Women PAC	18 FILER ID (Ethics Commission Filers) 00015597
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 33,704.75
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
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 checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 33,245.76
11. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/139 Rpt: 4/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, LINDA 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	7 Amount of Contribution (\$) \$40.00
	8 Principal occupation / Job title (See Instructions) RETIRED	
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, LINDA Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) RETIRED	
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, LINDA Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$32.00
	Principal occupation / Job title (See Instructions) RETIRED	
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, LINDA Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) RETIRED	
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, LINDA Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) RETIRED	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/139 Rpt: 5/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, LINDA	7 Amount of Contribution (\$) \$70.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, LINDA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, LINDA	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, LINDA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARECHIGA, YSELA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code LAREDO, TX 78045	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/139 Rpt: 6/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, NANCY	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alewine, Shari	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Boerne, TX 78015	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allick, Susan (Mrs.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code San Antonio, TX 78233	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allick, Susan (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78233	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allick, Susan (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78233	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/139 Rpt: 7/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allick, Susan (Mrs.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78233	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allick, Susan (Mrs.)	Amount of Contribution (\$) \$165.00
	Contributor address; City; State; Zip Code San Antonio, TX 78233	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allick, Susan (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78233	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allick, Susan (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78233	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allick, Susan (Mrs.)	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code San Antonio, TX 78233	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/139 Rpt: 8/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrade, Marcy	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78216	
8 Principal occupation / Job title (See Instructions) Non-Profit Executive Director		9 Employer (See Instructions) Assistance League of SA
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Carol (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Carol (Mrs.)	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Carol (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Carol (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/139 Rpt: 9/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Carol (Mrs.)	7 Amount of Contribution (\$) \$34.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78256	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Carol (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Carol (Mrs.)	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Carol (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Carol (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/139 Rpt: 10/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Carol (Mrs.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78256	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Curtis (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Cyber Planner		Employer (See Instructions) US Air Force
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anzaldua, Maria Sandra (Ms.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Boerne, TX 78015	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anzaldua, Maria Sandra (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Boerne, TX 78015	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Daphne Previt (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78246	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/139 Rpt: 11/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Daphne Previti (Mrs.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78246	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self Employed
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACA, LUCA	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code SCHERTZ, TX 78108	
Principal occupation / Job title (See Instructions) MEDICAL ASSISTANT		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACA, LUCA	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code SCHERTZ, TX 78108	
Principal occupation / Job title (See Instructions) MEDICAL ASSISTANT		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAEZ, CARRIE	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257	
Principal occupation / Job title (See Instructions) HOUSEWIFE		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAEZ, EDGARDP	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257	
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/139 Rpt: 12/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAEZ, EDGARDP 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257	7 Amount of Contribution (\$) \$35.00
	8 Principal occupation / Job title (See Instructions) ATTORNEY	9 Employer (See Instructions) SELF
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAEZ, EDGARDP Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) ATTORNEY	Employer (See Instructions) SELF
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLARD, BEATRIST Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) THERAPIST	Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, SUSAN Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) BUSINESS OWNER	Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTON, KEITH Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) CONGRESSIONAL D23 CANDIDATE	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/139 Rpt: 13/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BESSEE, GARY	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78255	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETS, DANIEL	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78723	
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETTS, DANIEL	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78701	
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEXAR COUNTY COMMISSIONERS COURT	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code San Antonio, TX 78205	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOFFO, FRANCES	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/139 Rpt: 14/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRISCOE, GARY	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKHOLDER, MARY	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78217	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKHOLDER, MARY	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78217	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKHOLDER, MARY	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78217	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKHOLDER, MARY	Amount of Contribution (\$) \$8.00
	Contributor address; City; State; Zip Code San Antonio, TX 78217	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/139 Rpt: 15/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKHOLDER, MARY	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78217	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKHOLDER, MARY	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78217	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKHOLDER, MARY	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code San Antonio, TX 78217	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baird, Laurie	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78263	
Principal occupation / Job title (See Instructions) Capacity Building Specialist		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barloco, Norma (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259-2350	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/139 Rpt: 16/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barloco, Norma (Mrs.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78259-2350	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barloco, Norma (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259-2350	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barloco, Norma (Mrs.)	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259-2350	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barloco, Norma (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259-2350	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barloco, Norma (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259-2350	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/139 Rpt: 17/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrera, Julia (Ms.)	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78228-1916	
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Barrera Industries
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bax, Patrice	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bendele, Sarah (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bendele, Sarah (Ms.)	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besselman, Carolyn	Amount of Contribution (\$) \$105.00
	Contributor address; City; State; Zip Code Spring Branch, TX 78070	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/139 Rpt: 18/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besselman, Carolyn	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Spring Branch, TX 78070	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besselman, Carolyn	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Spring Branch, TX 78070	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boldway, Jillian (Mrs.)	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code San Antonio, TX 78132	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boldway, Jillian (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78132	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boldway, Jillian (Mrs.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code San Antonio, TX 78132	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/139 Rpt: 19/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bollin, Teresa	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78245	
8 Principal occupation / Job title (See Instructions) Disabled Verteran		9 Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bollin, Teresa	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78245	
Principal occupation / Job title (See Instructions) Disabled Verteran		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bollin, Teresa	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78245	
Principal occupation / Job title (See Instructions) Disabled Verteran		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bollin, Teresa	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78245	
Principal occupation / Job title (See Instructions) Disabled Verteran		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bollin, Teresa	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78245	
Principal occupation / Job title (See Instructions) Disabled Verteran		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/139 Rpt: 20/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bollin, Teresa	7 Amount of Contribution (\$) \$65.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78245	
8 Principal occupation / Job title (See Instructions) Disabled Verteran		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bollin, Teresa	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78245	
Principal occupation / Job title (See Instructions) Disabled Verteran		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Booker, Francis (Ms.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Boerne, TX 78006	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Booker, Francis (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Boerne, TX 78006	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Booker, Francis (Ms.)	Amount of Contribution (\$) \$34.00
	Contributor address; City; State; Zip Code Boerne, TX 78006	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/139 Rpt: 21/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Booker, Francis (Ms.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Boerne, TX 78006	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boone, Aileen (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brame, Dolores (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brannon, Joyce	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brannon, Joyce	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/139 Rpt: 22/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brannon, Joyce	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78259	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulger, Linda	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdine, Charlotte (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-1811	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdine, Charlotte (Ms.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-1811	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdine, Charlotte (Ms.)	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-1811	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/139 Rpt: 23/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdine, Charlotte (Ms.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78260-1811	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdine, Charlotte (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-1811	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdine, Charlotte (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-1811	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdine, Charlotte (Ms.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-1811	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdine, Charlotte (Ms.)	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-1811	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/139 Rpt: 24/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNNINGHAM, BEVERLY	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code WINEDCREST, TX 78239	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNNINGHAM, BEVERLY	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code WINEDCREST, TX 78239	\$35.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camber, Kimberly	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code San Antonio, TX 78230	\$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camber, Kimberly	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code San Antonio, TX 78230	\$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cameron, Betsy (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code San Antonio, TX 78230-2883	\$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/139 Rpt: 25/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/139 Rpt: 26/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/139 Rpt: 27/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/139 Rpt: 28/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	7 Amount of Contribution (\$) \$68.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaday, Charlotte (Mrs.)	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/139 Rpt: 29/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canfield, Margaret (Ms.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78209	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canfield, Margaret (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canfield, Margaret (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canfield, Margaret (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canfield, Margaret (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/139 Rpt: 30/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castete, Judith	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78260-2249	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castete, Judith	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-2249	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castete, Judith	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-2249	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cathey, Beth (Mrs.)	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code Shavano Park, TX 78231-1437	
Principal occupation / Job title (See Instructions) Retired Attorney		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouser, George	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Universal City, TX 78148	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/139 Rpt: 31/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouser, Yvonne	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Universal City, TX 78148	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouser, Yvonne	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Universal City, TX 78148	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouser, Yvonne	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Universal City, TX 78148	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouser, Yvonne	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Universal City, TX 78148	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouser, Yvonne	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Universal City, TX 78148	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/139 Rpt: 32/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouser, Yvonne	7 Amount of Contribution (\$) \$315.00
	6 Contributor address; City; State; Zip Code Universal City, TX 78148	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouser, Yvonne	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Universal City, TX 78148	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouser, Yvonne	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Universal City, TX 78148	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouser, Yvonne	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Universal City, TX 78148	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouser, Yvonne	Amount of Contribution (\$) \$210.00
	Contributor address; City; State; Zip Code Universal City, TX 78148	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/139 Rpt: 33/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouser, Yvonne	7 Amount of Contribution (\$) \$47.00
	6 Contributor address; City; State; Zip Code Universal City, TX 78148	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouser, Yvonne	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Universal City, TX 78148	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conway, Cheryl	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conway, Cheryl	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conway, Cheryl	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/139 Rpt: 34/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conway, Cheryl	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78259	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conway, Cheryl	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conway, Cheryl	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conway, Cheryl	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conway, Cheryl	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/139 Rpt: 35/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coons, Kris	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78248	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coons, Kris	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coons, Kris	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coons, Kris	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coriden, Patricia	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/139 Rpt: 36/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coriden, Patricia	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78258	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Carolyn	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Retired Nurse		Employer (See Instructions)
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Carolyn	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Retired Nurse		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Carolyn	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Retired Nurse		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Carolyn	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Retired Nurse		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/139 Rpt: 37/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Carolyn	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78253	
8 Principal occupation / Job title (See Instructions) Retired Nurse		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Carolyn	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Retired Nurse		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Carolyn	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Retired Nurse		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creekmore, Cheryl (Mrs.)	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Universal City, TX 78148-3417	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creekmore, Cheryl (Mrs.)	Amount of Contribution (\$) \$55.00
	Contributor address; City; State; Zip Code Universal City, TX 78148-3417	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/139 Rpt: 38/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creekmore, Cheryl (Mrs.)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Universal City, TX 78148-3417	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creekmore, Cheryl (Mrs.)	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Universal City, TX 78148-3417	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creekmore, Cheryl (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Universal City, TX 78148-3417	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creekmore, Cheryl (Mrs.)	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Universal City, TX 78148-3417	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creekmore, Cheryl (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Universal City, TX 78148-3417	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/139 Rpt: 39/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creekmore, Cheryl (Mrs.)	7 Amount of Contribution (\$) \$235.00
	6 Contributor address; City; State; Zip Code Universal City, TX 78148-3417	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creekmore, Cheryl (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Universal City, TX 78148-3417	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creekmore, Cheryl (Mrs.)	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Universal City, TX 78148-3417	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creekmore, Cheryl (Mrs.)	Amount of Contribution (\$) \$85.00
	Contributor address; City; State; Zip Code Universal City, TX 78148-3417	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creekmore, Cheryl (Mrs.)	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Universal City, TX 78148-3417	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/139 Rpt: 40/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creekmore, Cheryl (Mrs.)	7 Amount of Contribution (\$) \$120.00
	6 Contributor address; City; State; Zip Code Universal City, TX 78148-3417	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creekmore, Cheryl (Mrs.)	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code Universal City, TX 78148-3417	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creekmore, Cheryl (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Universal City, TX 78148-3417	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LA CRUZ, CARLOS	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code UNIVERSAL CITY, TX 78148	
Principal occupation / Job title (See Instructions) CONGRESSIONAL CANDIDATE DISTRICT 35		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIETZMANN, DEBORAH	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257	
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/139 Rpt: 41/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIETZMANN, DEBORAH	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257	
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dale, Sharon (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danoff, Antonina	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self-Employed
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillon, Diane	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillon, Diane	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/139 Rpt: 42/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorazio, Mark (Mr.)	7 Amount of Contribution (\$) \$70.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78232	
8 Principal occupation / Job title (See Instructions) General Contractor		9 Employer (See Instructions) Dorazio Enterprises
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffy, Joy (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Hollywood Park, TX 78232	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffy, Joy (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Hollywood Park, TX 78232	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EARLY, KELLIE	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code KERRVILLE, TX 78028	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENDERLIN, JENNY	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code BOERNE, TX 78006	
Principal occupation / Job title (See Instructions) COMMUNITY DIRECTOR		Employer (See Instructions) BEXAR COUNTY PCT 3

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/139 Rpt: 43/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elsberry, Mai	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78259	
8 Principal occupation / Job title (See Instructions) Tax Professional		9 Employer (See Instructions) Self Employed
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elsberry, Mai	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Tax Professional		Employer (See Instructions) Self Employed
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elsberry, Mai	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Tax Professional		Employer (See Instructions) Self Employed
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elsberry, Mai	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Tax Professional		Employer (See Instructions) Self Employed
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Espinoza, Nora (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/139 Rpt: 44/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Espinoza, Nora (Mrs.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78258	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Espinoza, Nora (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etnyre, Annette (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-7810	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etnyre, Annette (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-7810	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etnyre, Annette (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-7810	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/139 Rpt: 45/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etnyre, Annette (Mrs.)	7 Amount of Contribution (\$) \$65.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78260-7810	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etnyre, Annette (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-7810	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, ALLISON	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code TAYLOR, TX 76574	
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, ALLISON	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code TAYLOR, TX 76574	
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farias, Anna M. (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78224	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/139 Rpt: 46/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farias, Anna M. (Ms.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78224	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farias, Anna M. (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78224	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farias, Anna M. (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78224	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felty, Maricela (Mrs.)	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78231	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Ashley (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/139 Rpt: 47/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOEKEN, MELODY	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	
8 Principal occupation / Job title (See Instructions) PUBLICIST		9 Employer (See Instructions) SELF-EMPLOYED
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLLUB, FRANI	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	
Principal occupation / Job title (See Instructions) MASAGE THERAPIST		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLLUB, FRANI	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	
Principal occupation / Job title (See Instructions) MASAGE THERAPIST		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLLUB, FRANI	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	
Principal occupation / Job title (See Instructions) MASAGE THERAPIST		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLLUB, FRANI	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	
Principal occupation / Job title (See Instructions) MASAGE THERAPIST		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/139 Rpt: 48/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENWOOD, LAURA	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code SELMA, TX 78154	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENWOOD, LAURA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SELMA, TX 78154	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENWOOD, LAURA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SELMA, TX 78154	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENWOOD, LAURA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code SELMA, TX 78154	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, CHRISTINA	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78245	
Principal occupation / Job title (See Instructions) BARTENDER		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/139 Rpt: 49/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUIDO, PATTI	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	
8 Principal occupation / Job title (See Instructions) DISTRICT DIRECTOR		9 Employer (See Instructions) MARC LAHOOD CAMPAIGN
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUIDO, PATTI	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	
Principal occupation / Job title (See Instructions) DISTRICT DIRECTOR		Employer (See Instructions) MARC LAHOOD CAMPAIGN
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, DEMETRIO	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78261	
Principal occupation / Job title (See Instructions) WELLMED		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Ada	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Ada	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/139 Rpt: 50/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Ada	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78230	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Ada	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Ada	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Ada	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Ada (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/139 Rpt: 51/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Ada (Mrs.)	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78230	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerleman, Dimitra Mimi (Mrs.)	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78231	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gowan, Robert	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78210	
Principal occupation / Job title (See Instructions) District Director		Employer (See Instructions) Senator Donna Campbell
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Glenda (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Johnson Controls
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Glenda (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Johnson Controls

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/139 Rpt: 52/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gumm, Paul (Capt.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78216	
8 Principal occupation / Job title (See Instructions) Deputy Constable Precinct 3		9 Employer (See Instructions) Bexar County, TX
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gumm, Paul (Capt.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Deputy Constable Precinct 3		Employer (See Instructions) Bexar County, TX
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Sabrina	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78261	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Sabrina	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78261	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutting, Patricia (Mrs.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/139 Rpt: 53/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutting, Patricia (Mrs.)	7 Amount of Contribution (\$) \$85.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78253	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutting, Patricia (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutting, Patricia (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutting, Patricia (Mrs.)	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutting, Patricia (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/139 Rpt: 54/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutting, Patricia (Mrs.)	7 Amount of Contribution (\$) \$185.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78253	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutting, Patricia (Mrs.)	Amount of Contribution (\$) \$51.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutting, Patricia (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYES, MARY	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code SAN ANTONO, TX 78209	
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF EMPLOYED
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HJALMQUIST, MELISSA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78256-1645	
Principal occupation / Job title (See Instructions) REAL ESTATE ATTORNEY		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/139 Rpt: 55/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLDER, LA NITA 6 Contributor address; City; State; Zip Code SAN ANTONIO , TX 78253	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) ADMINISTRATOR		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamberg, Charlcye Lanae Contributor address; City; State; Zip Code San Antonio, TX 78259	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions) Complete Chess Foundation
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamberg, Charlcye Lanae Contributor address; City; State; Zip Code San Antonio, TX 78259	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions) Complete Chess Foundation
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamberg, Charlcye Lanae Contributor address; City; State; Zip Code San Antonio, TX 78259	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions) Complete Chess Foundation
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamberg, Charlcye Lanae Contributor address; City; State; Zip Code San Antonio, TX 78259	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions) Complete Chess Foundation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/139 Rpt: 56/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamberg, Charcyce Lanae	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78259	
8 Principal occupation / Job title (See Instructions) Development Director		9 Employer (See Instructions) Complete Chess Foundation
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasslocher, Marcia	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasslocher, Marcia	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasslocher, Marcia	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasslocher, Marcia	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/139 Rpt: 57/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor Hasslocher, Marcia	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78209	
8 Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor Hastings, Pat (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor Hastings, Pat (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor Hastings, Pat (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor Hastings, Pat (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/139 Rpt: 58/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Betty (Mrs.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78259	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Betty (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Betty (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Betty (Mrs.)	Amount of Contribution (\$) \$51.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Betty (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/139 Rpt: 59/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Betty (Mrs.)	7 Amount of Contribution (\$) \$34.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78259	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrix, Jennifer (Dr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code San Antonio, TX 78257	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self Employed
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrix, Jennifer (Dr.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78257	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self Employed
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrix, Jennifer (Dr.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78257	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self Employed
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrix, Jennifer (Dr.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78257	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/139 Rpt: 60/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrix, Jennifer (Dr.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78257	
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self Employed
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrix, Jennifer (Dr.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78257	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self Employed
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrix, Jennifer (Dr.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78257	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self Employed
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrix, Jennifer (Dr.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78257	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self Employed
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrix, Jennifer (Dr.)	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78257	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/139 Rpt: 61/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herbold, Jo-Anne (Mrs.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78258-7422	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herbold, Jo-Anne (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258-7422	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herbold, Jo-Anne (Mrs.)	Amount of Contribution (\$) \$34.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258-7422	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herbold, Jo-Anne (Mrs.)	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258-7422	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herbold, Jo-Anne (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258-7422	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/139 Rpt: 62/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Linda	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78249	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Linda	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78249	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Linda	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code San Antonio, TX 78249	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Linda	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78249	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Linda	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78249	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/139 Rpt: 63/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Linda	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78249	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Linda	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78249	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Linda	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78249	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilburn, Elizabeth (Ms.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247-4345	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilburn, Elizabeth (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247-4345	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/139 Rpt: 64/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilburn, Elizabeth (Ms.)	7 Amount of Contribution (\$) \$34.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78247-4345	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilburn, Elizabeth (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247-4345	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilburn, Elizabeth (Ms.)	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247-4345	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilburn, Elizabeth (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247-4345	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollan, Christine	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78255	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Golden Age Senior Placement

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/139 Rpt: 65/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horsey, Chantel	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78258	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, JACQUELINE	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code KIRBY, TX 78219	
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, JACQUELINE	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code KIRBY, TX 78219	
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, JACQUELINE	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code KIRBY, TX 78219	
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, JACQUELINE	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code KIRBY, TX 78219	
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/139 Rpt: 66/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, JACQUELINE	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code KIRBY, TX 78219	
8 Principal occupation / Job title (See Instructions) SELF-EMPLOYED		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, JACQUELINE	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code KIRBY, TX 78219	
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBSEN, DEBRA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78254	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBSEN, DEBRA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78254	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMARILLO, EMMA	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code LA CRESCENTA, CA 91214	
Principal occupation / Job title (See Instructions) HOUSEWIFE		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/139 Rpt: 67/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, PAULINA 6 Contributor address; City; State; Zip Code SAN ANTONO, TX 78255	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) HOUSEWIFE		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, PAULINA Contributor address; City; State; Zip Code SAN ANTONIO, TX 78255	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) HOUSEWIFE		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, PAULINA Contributor address; City; State; Zip Code SAN ANTONO, TX 78255	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) HOUSEWIFE		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, PAULINA Contributor address; City; State; Zip Code SAN ANTONO, TX 78255	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) HOUSEWIFE		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, PAULINA Contributor address; City; State; Zip Code SAN ANTONO, TX 78255	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) HOUSEWIFE		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/139 Rpt: 68/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, PAULINA	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code SAN ANTONO, TX 78255	
8 Principal occupation / Job title (See Instructions) HOUSEWIFE		9 Employer (See Instructions)
Date 07/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffers, Marion (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffers, Marion (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jowdy, Marilyn	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78217	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jowdy, Marilyn	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78217	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/139 Rpt: 69/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jowdy, Marilyn	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jowdy, Marilyn	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78217	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jowdy, Marilyn	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78217	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jowdy, Marilyn	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78217	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEELIN, ALICE	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code BANDERA, TX 78003	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 67/139 Rpt: 70/164
2 FILER NAME Bexar County Republican Women PAC				3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAUSE, RYAN	7 Amount of Contribution (\$) \$35.00		
	6 Contributor address; City; State; Zip Code SEGUIN, TX 78155			
8 Principal occupation / Job title (See Instructions) COMPANY PRESIDENT		9 Employer (See Instructions) DREAM BIG FACILITY, LLC		
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAUSE, RYAN	Amount of Contribution (\$) \$70.00		
	Contributor address; City; State; Zip Code SEGUIN, TX 78155			
Principal occupation / Job title (See Instructions) COMPANY PRESIDENT		Employer (See Instructions) DREAM BIG FACILITY, LLC		
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kabes, Laurie (Mrs.)	Amount of Contribution (\$) \$35.00		
	Contributor address; City; State; Zip Code San Antonio, TX 78232			
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Marketing Initiatives Worx		
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kabes, Laurie (Mrs.)	Amount of Contribution (\$) \$100.00		
	Contributor address; City; State; Zip Code San Antonio, TX 78232			
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Marketing Initiatives Worx		
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kabes, Laurie (Mrs.)	Amount of Contribution (\$) \$35.00		
	Contributor address; City; State; Zip Code San Antonio, TX 78232			
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Marketing Initiatives Worx		

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/139 Rpt: 71/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kabes, Laurie (Mrs.)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78232	
8 Principal occupation / Job title (See Instructions) Business Development		9 Employer (See Instructions) Marketing Initiatives Worx
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kabes, Laurie (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78232	
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Marketing Initiatives Worx
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kabes, Laurie (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78232	
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Marketing Initiatives Worx
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kabes, Laurie (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78232	
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Marketing Initiatives Worx
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kabes, Laurie (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78232	
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Marketing Initiatives Worx

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SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 69/139 Rpt: 72/164
2 FILER NAME Bexar County Republican Women PAC			3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor Kabes, Laurie (Mrs.)	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78232		
8 Principal occupation / Job title (See Instructions) Business Development		9 Employer (See Instructions) Marketing Initiatives Worx	
Date 12/12/2025	Full name of contributor Kabes, Laurie (Mrs.)	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78232		
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Marketing Initiatives Worx	
Date 08/08/2025	Full name of contributor Kegley, Anita	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216		
Principal occupation / Job title (See Instructions) General Contractor		Employer (See Instructions) Kegley, Inc.	
Date 10/10/2025	Full name of contributor Kegley, Anita	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216		
Principal occupation / Job title (See Instructions) General Contractor		Employer (See Instructions) Kegley, Inc.	
Date 11/14/2025	Full name of contributor Kegley, Anita	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216		
Principal occupation / Job title (See Instructions) General Contractor		Employer (See Instructions) Kegley, Inc.	

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/139 Rpt: 73/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kegley, Anita	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78216	
8 Principal occupation / Job title (See Instructions) General Contractor		9 Employer (See Instructions) Kegley, Inc.
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennon, Shirley	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennon, Shirley	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennon, Shirley	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirby, Laura (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78213	
Principal occupation / Job title (See Instructions) Commercial Loan Consultant		Employer (See Instructions) LLK Consulting LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/139 Rpt: 74/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirby, Laura (Ms.)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78213	
8 Principal occupation / Job title (See Instructions) Commercial Loan Consultant		9 Employer (See Instructions) LLK Consulting LLC
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirby, Laura (Ms.)	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78213	
Principal occupation / Job title (See Instructions) Commercial Loan Consultant		Employer (See Instructions) LLK Consulting LLC
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirby, Laura (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78213	
Principal occupation / Job title (See Instructions) Commercial Loan Consultant		Employer (See Instructions) LLK Consulting LLC
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirby, Laura (Ms.)	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code San Antonio, TX 78213	
Principal occupation / Job title (See Instructions) Commercial Loan Consultant		Employer (See Instructions) LLK Consulting LLC
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirby, Laura (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78213	
Principal occupation / Job title (See Instructions) Commercial Loan Consultant		Employer (See Instructions) LLK Consulting LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/139 Rpt: 75/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEOPARD, GEORGANNE	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78261	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lahood, Marc	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code San Antonio, TX 78212	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Lahood Law, PLLC
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamerson, Nettie (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamerson, Nettie (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamerson, Nettie (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/139 Rpt: 76/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamerson, Nettie (Mrs.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78258-2948	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamerson, Nettie (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamerson, Nettie (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamerson, Nettie (Mrs.)	Amount of Contribution (\$) \$51.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamerson, Nettie (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/139 Rpt: 77/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamerson, Nettie (Mrs.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78258-2948	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamerson, Nettie (Mrs.)	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamerson, Nettie (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258-2948	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Jenny	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Remax
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Jenny	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Remax

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/139 Rpt: 78/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, CARINE	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code DРИPPING SPRINGS, TX 78260	
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) GREG ABBOTT CAMPAIGN
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, CARINE	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code DРИPPING SPRINGS, TX 78260	
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) GREG ABBOTT CAMPAIGN
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, CARINE	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code DРИPPING SPRINGS, TX 78260	
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) GREG ABBOTT CAMPAIGN
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, CARINE	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code DРИPPING SPRINGS, TX 78260	
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) GREG ABBOTT CAMPAIGN
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, RICARDO	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254	
Principal occupation / Job title (See Instructions) CANDIDATE, HD 125		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/139 Rpt: 79/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, WESTON	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78232	
8 Principal occupation / Job title (See Instructions) Candidate		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYFIELD, SAMUEL	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	
Principal occupation / Job title (See Instructions) POLICIAL DIRECTOR		Employer (See Instructions) MARC LAHOOD CAMPAIGN
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYFIELD, SAMUEL	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	
Principal occupation / Job title (See Instructions) POLICIAL DIRECTOR		Employer (See Instructions) MARC LAHOOD CAMPAIGN
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCARTHUR, JEANNIE	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCARTHUR, JEANNIE	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/139 Rpt: 80/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDEZ, SAM	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOONEY, NARCISSA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code GARDEN RIDGE, TX 78266	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maffitt, Muriel Jane	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78238	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maffitt, Muriel Jane	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78238	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maffitt, Muriel Jane	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78238	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/139 Rpt: 81/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maffitt, Muriel Jane 6 Contributor address; City; State; Zip Code San Antonio, TX 78238	7 Amount of Contribution (\$) \$35.00
	8 Principal occupation / Job title (See Instructions) Retired	
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maffitt, Muriel Jane Contributor address; City; State; Zip Code San Antonio, TX 78238	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired	
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maffitt, Muriel Jane Contributor address; City; State; Zip Code San Antonio, TX 78238	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Retired	
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maffitt, Muriel Jane Contributor address; City; State; Zip Code San Antonio, TX 78238	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired	
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marquard, Ryan Contributor address; City; State; Zip Code Boerne, TX 78015	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Finacial Advisor	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/139 Rpt: 82/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marquard, Ryan	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Boerne, TX 78015	
8 Principal occupation / Job title (See Instructions) Financial Advisor		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marvin, Ruby (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248-1705	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Maureen M. (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259-2113	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Maureen M. (Ms.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259-2113	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Maureen M. (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259-2113	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/139 Rpt: 83/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Maureen M. (Ms.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78259-2113	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Maureen M. (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259-2113	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Maureen M. (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259-2113	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Maureen M. (Ms.)	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259-2113	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGee, Paula	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) McGee Law, PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/139 Rpt: 84/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGee, Paula	7 Amount of Contribution (\$) \$70.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78230	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) McGee Law, PLLC
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moody, Grant (Commissioner)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78255	
Principal occupation / Job title (See Instructions) Commissioner		Employer (See Instructions) Bexar County
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgenthaler, Carol	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78232	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgenthaler, Carol	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78232	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgenthaler, Carol	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78232	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/139 Rpt: 85/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgenthaler, Carol 6 Contributor address; City; State; Zip Code San Antonio, TX 78232	7 Amount of Contribution (\$) \$35.00
	8 Principal occupation / Job title (See Instructions) Retired	
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgenthaler, Carol Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired	
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgenthaler, Carol Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$65.00
	Principal occupation / Job title (See Instructions) Retired	
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgenthaler, Carol Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) Retired	
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mrzlak, Lydia (Ms.) Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/139 Rpt: 86/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mrzlak, Lydia (Ms.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78247	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mrzlak, Lydia (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mrzlak, Lydia (Ms.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mrzlak, Lydia (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mrzlak, Lydia (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/139 Rpt: 87/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mrzlak, Lydia (Ms.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78247	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mrzlak, Lydia (Ms.)	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mrzlak, Lydia (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Karen (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Karen (Ms.)	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/139 Rpt: 88/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Karen (Ms.)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78258	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Karen (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Karen (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Karen (Ms.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Karen (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/139 Rpt: 89/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Karen (Ms.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78258	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Karen (Ms.)	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIXON, ANNETTE	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78229	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIXON-MENDEZ, NINA	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nealon, LINDA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/139 Rpt: 90/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nealon, Linda	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78258	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nealon, Linda	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nealon, Linda	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nealon, Linda	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nealon, Linda	Amount of Contribution (\$) \$34.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/139 Rpt: 91/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nealon, Linda	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78258	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nino, Susan	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) Sales Director		Employer (See Instructions) SA Res. Assoc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nixon-Mendez, Nina (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nixon-Mendez, Nina (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nixon-Mendez, Nina (Mrs.)	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/139 Rpt: 92/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nixon-Mendez, Nina (Mrs.)	7 Amount of Contribution (\$) \$17.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78216	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nixon-Mendez, Nina (Mrs.)	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Jane (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78261	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Jane (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code San Antonio, TX 78261	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Jane (Ms.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78261	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/139 Rpt: 93/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Jane (Ms.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78261	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Jane (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78261	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Jane (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78261	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Jane (Ms.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78261	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Jane (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78261	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/139 Rpt: 94/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Jane (Ms.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78261	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omeis, Betsy (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78255	
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UT Health-Urology
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omeis, Betsy (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78255	
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UT Health-Urology
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omeis, Betsy (Ms.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78255	
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UT Health-Urology
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omeis, Betsy (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78255	
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UT Health-Urology

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/139 Rpt: 95/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omeis, Betsy (Ms.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78255	
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) UT Health-Urology
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMIERI, MELISSA	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMIERI, MELISSA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, ROSA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78251	
Principal occupation / Job title (See Instructions) RN HOSPICE		Employer (See Instructions) THREE OAKS HOSPICE
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, ROSA	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code San Antonio, TX 78251	
Principal occupation / Job title (See Instructions) RN HOSPICE		Employer (See Instructions) THREE OAKS HOSPICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 93/139 Rpt: 96/164
2 FILER NAME Bexar County Republican Women PAC			3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, ROSA 6 Contributor address; City; State; Zip Code San Antonio, TX 78251	7 Amount of Contribution (\$) \$35.00	
8 Principal occupation / Job title (See Instructions) RN HOSPICE		9 Employer (See Instructions) THREE OAKS HOSPICE	
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, ROSA Contributor address; City; State; Zip Code San Antonio, TX 78251	Amount of Contribution (\$) \$35.00	
Principal occupation / Job title (See Instructions) RN HOSPICE		Employer (See Instructions) THREE OAKS HOSPICE	
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRY, AHINYAA Contributor address; City; State; Zip Code SAN ANTONIO, TX 78245	Amount of Contribution (\$) \$35.00	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)	
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICCIANO, HALI Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	Amount of Contribution (\$) \$35.00	
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions)	
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICCIANO, HALI Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	Amount of Contribution (\$) \$65.00	
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/139 Rpt: 97/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pabst, Jane 6 Contributor address; City; State; Zip Code San Antonio, TX 78213	7 Amount of Contribution (\$) \$35.00
	8 Principal occupation / Job title (See Instructions) Retired	
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pabst, Jane Contributor address; City; State; Zip Code San Antonio, TX 78213	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) Retired	
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pabst, Jane Contributor address; City; State; Zip Code San Antonio, TX 78213	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired	
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pabst, Jane Contributor address; City; State; Zip Code San Antonio, TX 78213	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired	
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pabst, Jane Contributor address; City; State; Zip Code San Antonio, TX 78213	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired	

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/139 Rpt: 98/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pabst, Jane	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78213	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Julie (Judge)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Julie (Judge)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Julie (Judge)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Maryann	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code San Antonio, TX 78229-1712	
Principal occupation / Job title (See Instructions) Fashion Consultant/Sales		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/139 Rpt: 99/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Maryann	7 Amount of Contribution (\$) \$600.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78229-1712	
8 Principal occupation / Job title (See Instructions) Fashion Consultant/Sales		9 Employer (See Instructions) Self
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Maryann	Amount of Contribution (\$) \$1,050.00
	Contributor address; City; State; Zip Code San Antonio, TX 78229-1712	
Principal occupation / Job title (See Instructions) Fashion Consultant/Sales		Employer (See Instructions) Self
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Clayton (The Honorable)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Councilman, City of San Antonio
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Clayton (The Honorable)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Jo Lynn (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retailer/Owner		Employer (See Instructions) Collector's Gallery

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/139 Rpt: 100/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Jo Lynn (Mrs.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78248	
8 Principal occupation / Job title (See Instructions) Retailer/Owner		9 Employer (See Instructions) Collector's Gallery
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Jo Lynn (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retailer/Owner		Employer (See Instructions) Collector's Gallery
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Jo Lynn (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retailer/Owner		Employer (See Instructions) Collector's Gallery
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Jo Lynn (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retailer/Owner		Employer (See Instructions) Collector's Gallery
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Jo Lynn (Mrs.)	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retailer/Owner		Employer (See Instructions) Collector's Gallery

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/139 Rpt: 101/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Jo Lynn (Mrs.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78248	
8 Principal occupation / Job title (See Instructions) Retailer/Owner		9 Employer (See Instructions) Collector's Gallery
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Power, Chrystina	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Spring Branch, TX 78070	
Principal occupation / Job title (See Instructions) Hospital Administrator		Employer (See Instructions) Retired Air Force
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Power, Chrystina	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Spring Branch, TX 78070	
Principal occupation / Job title (See Instructions) Hospital Administrator		Employer (See Instructions) Retired Air Force
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Power, Chrystina	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Spring Branch, TX 78070	
Principal occupation / Job title (See Instructions) Hospital Administrator		Employer (See Instructions) Retired Air Force
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Power, Chrystina	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Spring Branch, TX 78070	
Principal occupation / Job title (See Instructions) Hospital Administrator		Employer (See Instructions) Retired Air Force

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/139 Rpt: 102/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Power, Chrystina	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Spring Branch, TX 78070	
8 Principal occupation / Job title (See Instructions) Hospital Administrator		9 Employer (See Instructions) Retired Air Force
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Power, Chrystina	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Spring Branch, TX 78070	
Principal occupation / Job title (See Instructions) Hospital Administrator		Employer (See Instructions) Retired Air Force
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Power, Chrystina	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Spring Branch, TX 78070	
Principal occupation / Job title (See Instructions) Hospital Administrator		Employer (See Instructions) Retired Air Force
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Power, Chrystina	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code Spring Branch, TX 78070	
Principal occupation / Job title (See Instructions) Hospital Administrator		Employer (See Instructions) Retired Air Force
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Power, Chrystina	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Spring Branch, TX 78070	
Principal occupation / Job title (See Instructions) Hospital Administrator		Employer (See Instructions) Retired Air Force

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/139 Rpt: 103/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Heidi	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78256	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Heidi	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Heidi	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Heidi	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Heidi	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/139 Rpt: 104/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Heidi	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78256	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Heidi	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Heidi	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Heidi	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Heidi	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/139 Rpt: 105/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATH, DIANE	7 Amount of Contribution (\$) \$34.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78209	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REES, VIOLA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code LAREDO, TX 78045	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REES, VIOLA	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code LAREDO, TX 78045	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROJAS, PAUL	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SOUTHWEST RESEARCH INSTITUE
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWLAND, RHONDA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Windcrest, TX 78139	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/139 Rpt: 106/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Carla Jo	7 Amount of Contribution (\$) \$34.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78232	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhoads, Kathy	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhoads, Kathy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhoads, Kathy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhoads, Kathy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/139 Rpt: 107/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhoads, Kathy	7 Amount of Contribution (\$) \$70.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78230	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhoads, Kathy	Amount of Contribution (\$) \$34.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhoads, Kathy	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhoads, Kathy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Terri	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/139 Rpt: 108/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Terri 6 Contributor address; City; State; Zip Code San Antonio, TX 78258	7 Amount of Contribution (\$) \$70.00
	8 Principal occupation / Job title (See Instructions) Retired	
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Terri Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired	
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Terri Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired	
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Terri Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$105.00
	Principal occupation / Job title (See Instructions) Retired	
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Terri Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$68.00
	Principal occupation / Job title (See Instructions) Retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 106/139 Rpt: 109/164
2 FILER NAME Bexar County Republican Women PAC			3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Terri	7 Amount of Contribution (\$) \$35.00	
	6 Contributor address; City; State; Zip Code San Antonio, TX 78258		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Terri	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78258		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Terri	Amount of Contribution (\$) \$47.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78258		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricketts, Larry	Amount of Contribution (\$) \$55.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78223		
Principal occupation / Job title (See Instructions) Deputy Constable		Employer (See Instructions) Bexar County Pct 3	
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricketts, Larry	Amount of Contribution (\$) \$15.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78223		
Principal occupation / Job title (See Instructions) Deputy Constable		Employer (See Instructions) Bexar County Pct 3	

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SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 107/139 Rpt: 110/164	
2 FILER NAME Bexar County Republican Women PAC				3 Filer ID (Ethics Commission Filers) 00015597	
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricketts, Larry	7 Amount of Contribution (\$) \$35.00			
	6 Contributor address; City; State; Zip Code San Antonio, TX 78223				
8 Principal occupation / Job title (See Instructions) Deputy Constable		9 Employer (See Instructions) Bexar County Pct 3			
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, George (Mr.)	Amount of Contribution (\$) \$35.00			
	Contributor address; City; State; Zip Code San Antonio, TX 78232				
Principal occupation / Job title (See Instructions) author/commentator		Employer (See Instructions) self			
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, George (Mr.)	Amount of Contribution (\$) \$35.00			
	Contributor address; City; State; Zip Code San Antonio, TX 78232				
Principal occupation / Job title (See Instructions) author/commentator		Employer (See Instructions) self			
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, George (Mr.)	Amount of Contribution (\$) \$35.00			
	Contributor address; City; State; Zip Code San Antonio, TX 78232				
Principal occupation / Job title (See Instructions) author/commentator		Employer (See Instructions) self			
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, George (Mr.)	Amount of Contribution (\$) \$35.00			
	Contributor address; City; State; Zip Code San Antonio, TX 78232				
Principal occupation / Job title (See Instructions) author/commentator		Employer (See Instructions) self			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/139 Rpt: 111/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, BEATRICE	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code LAREDO, TX 78045	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHROEDER, BARBARA	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code BULVERDE, TX 78163	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHROEDER, BARBARA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code BULVERDE, TX 78163	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHROEDER, BARBARA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code BULVERDE, TX 78163	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHROEDER, BARBARA	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code BULVERDE, TX 78163	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/139 Rpt: 112/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, SABRINA	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78232	
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) CABS RE
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, THOMAS	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code ADDISON, TX 75001	
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPEARS, TERESA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78701	
Principal occupation / Job title (See Instructions) CAMPAIGN CONSULTANT		Employer (See Instructions) CHRISTI CRADDICK
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPEARS, TERESA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78701	
Principal occupation / Job title (See Instructions) CAMPAIGN CONSULTANT		Employer (See Instructions) CHRISTI CRADDICK
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STENGEL, JUDY	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/139 Rpt: 113/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, NORMA	7 Amount of Contribution (\$) \$140.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Ann (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Ann (Ms.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Ann (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Ann (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/139 Rpt: 114/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Ann (Ms.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78230	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simdorn, Nancy (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Boerne, TX 78006	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmonds, Kelley	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Real Estate Professional		Employer (See Instructions) SBK Asset Mgmt Group
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmonds, Kelley	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Real Estate Professional		Employer (See Instructions) SBK Asset Mgmt Group
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmonds, Kelley	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Real Estate Professional		Employer (See Instructions) SBK Asset Mgmt Group

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/139 Rpt: 115/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmonds, Kelley	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78216	
8 Principal occupation / Job title (See Instructions) Real Estate Professional		9 Employer (See Instructions) SBK Asset Mgmt Group
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmonds, Kelley	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Real Estate Professional		Employer (See Instructions) SBK Asset Mgmt Group
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinclair, Kyle	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Hospital CEO		Employer (See Instructions) Self Employed
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skokan, Natalie	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78249	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Touchstone Crystals
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skokan, Natalie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78249	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Touchstone Crystals

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/139 Rpt: 116/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skokan, Natalie	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78249	
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Touchstone Crystals
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skokan, Natalie	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78249	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Touchstone Crystals
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solcher, Susan (Ms.)	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-4284	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solcher, Susan (Ms.)	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-4284	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solcher, Susan (Ms.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-4284	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

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2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soules, Carlton (Mr.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78217-3411	
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self Employed
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spears, Misty (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Communications Director		Employer (See Instructions) Bexar County Precinct 3
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spears, Misty (Mrs.)	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Communications Director		Employer (See Instructions) Bexar County Precinct 3
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spears, Misty (Mrs.)	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Communications Director		Employer (See Instructions) Bexar County Precinct 3
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spears, Misty (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Communications Director		Employer (See Instructions) Bexar County Precinct 3

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 115/139 Rpt: 118/164	
2 FILER NAME Bexar County Republican Women PAC				3 Filer ID (Ethics Commission Filers) 00015597	
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprenger, Molly	7 Amount of Contribution (\$) \$35.00			
	6 Contributor address; City; State; Zip Code San Antonio, TX 78261				
8 Principal occupation / Job title (See Instructions) Cosmetologist		9 Employer (See Instructions) Self-Employed			
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprenger, Molly	Amount of Contribution (\$) \$35.00			
	Contributor address; City; State; Zip Code San Antonio, TX 78261				
Principal occupation / Job title (See Instructions) Cosmetologist		Employer (See Instructions) Self-Employed			
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprenger, Molly	Amount of Contribution (\$) \$35.00			
	Contributor address; City; State; Zip Code San Antonio, TX 78261				
Principal occupation / Job title (See Instructions) Cosmetologist		Employer (See Instructions) Self-Employed			
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprenger, Molly	Amount of Contribution (\$) \$35.00			
	Contributor address; City; State; Zip Code San Antonio, TX 78261				
Principal occupation / Job title (See Instructions) Cosmetologist		Employer (See Instructions) Self-Employed			
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprenger, Molly	Amount of Contribution (\$) \$40.00			
	Contributor address; City; State; Zip Code San Antonio, TX 78261				
Principal occupation / Job title (See Instructions) Cosmetologist		Employer (See Instructions) Self-Employed			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/139 Rpt: 119/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprenger, Molly	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78261	
8 Principal occupation / Job title (See Instructions) Cosmetologist		9 Employer (See Instructions) Self-Employed
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Statham, Gina (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-1811	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Statham, Gina (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-1811	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Statham, Gina (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-1811	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Statham, Gina (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260-1811	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 117/139 Rpt: 120/164
2 FILER NAME Bexar County Republican Women PAC			3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steenhoek, Pamela	7 Amount of Contribution (\$) \$35.00	
	6 Contributor address; City; State; Zip Code Spring Branch, TX 78070		
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Owner	
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steenhoek, Pamela	Amount of Contribution (\$) \$50.00	
	Contributor address; City; State; Zip Code Spring Branch, TX 78070		
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Owner	
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steenhoek, Pamela	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code Spring Branch, TX 78070		
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Owner	
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swetman, Ellen (Ms.)	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code St. Hedwig, TX 78152		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Diva Designs of Texas, LLC	
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swetman, Ellen (Ms.)	Amount of Contribution (\$) \$35.00	
	Contributor address; City; State; Zip Code St. Hedwig, TX 78152		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Diva Designs of Texas, LLC	

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/139 Rpt: 121/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEIXIERA, MARK 6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	7 Amount of Contribution (\$) \$70.00
8 Principal occupation / Job title (See Instructions) CANDIDATE FOR CD 21		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TESSMER, HEATHER Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TESSMER, HEATHER Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TESSMER, HEATHER Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THIEL, SALLY Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/139 Rpt: 122/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIETZ, SALLY	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAINER, JAMES	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78737	
Principal occupation / Job title (See Instructions) CONGRESS D21 CANDIDATE		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, RACHAEL	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78244	
Principal occupation / Job title (See Instructions) Media		Employer (See Instructions) Self Employed
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROMBITAS, KELLIE	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROMBITAS, KELLIE	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/139 Rpt: 123/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROMBITAS, KELLIE	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROMBITAS, KELLIE	Amount of Contribution (\$) \$315.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROMBITAS, KELLIE	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thiel, Isis	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78233	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thiel, Isis	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78233	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/139 Rpt: 124/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tree, Connie (Mrs.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78232	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tree, Connie (Mrs.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code San Antonio, TX 78232	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Sandra	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) TV Host		Employer (See Instructions) KCWY
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULRICH, Joyce	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULRICH, Joyce	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/139 Rpt: 125/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERMARK, DENISE	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78260	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERMARK, DENISE	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERMARK, DENISE	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERMARK, DENISE	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERMARK, DENISE	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/139 Rpt: 126/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERMARK, DENISE	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78260	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERMARK, DENISE	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERMARK, DENISE	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERMARK, DENISE	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code San Antonio, TX 78260	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOLZ, VILMA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code LAREDO, TX 78041	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/139 Rpt: 127/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van De Walle, Carol (Mrs.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78216-2229	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van De Walle, Carol (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216-2229	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van De Walle, Carol (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216-2229	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van De Walle, Carol (Mrs.)	Amount of Contribution (\$) \$165.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216-2229	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van De Walle, Carol (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216-2229	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/139 Rpt: 128/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van De Walle, Carol (Mrs.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78216-2229	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van De Walle, Carol (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216-2229	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van De Walle, Carol (Mrs.)	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216-2229	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Bartholomew (Mr.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78257	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) 100 Club of San Antonio
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vlieger, Virginia	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code Boerne, TX 78006	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/139 Rpt: 129/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vojvodich, Mark (The Honorable)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78232	
8 Principal occupation / Job title (See Instructions) Constable		9 Employer (See Instructions) Bexar County
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vojvodich, Mark (The Honorable)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78232	
Principal occupation / Job title (See Instructions) Constable		Employer (See Instructions) Bexar County
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vojvodich, Mark (The Honorable)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78232	
Principal occupation / Job title (See Instructions) Constable		Employer (See Instructions) Bexar County
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vojvodich, Mark (The Honorable)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78232	
Principal occupation / Job title (See Instructions) Constable		Employer (See Instructions) Bexar County
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAYMAN, DENISE	Amount of Contribution (\$) \$68.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/139 Rpt: 130/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ware, Juanita (Mrs.)	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78248	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ware, Juanita (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ware, Juanita (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wentworth, Karleen (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2228	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wentworth, Karleen (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2228	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/139 Rpt: 131/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wentworth, Karleen (Mrs.)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78209-2228	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wentworth, Karleen (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209-2228	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Michael	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Boerne, TX 78006	
Principal occupation / Job title (See Instructions) Property Management		Employer (See Instructions) Owner
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Michael	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Boerne, TX 78006	
Principal occupation / Job title (See Instructions) Property Management		Employer (See Instructions) Owner
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Michael	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Boerne, TX 78006	
Principal occupation / Job title (See Instructions) Property Management		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/139 Rpt: 132/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Michael	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Boerne, TX 78006	
8 Principal occupation / Job title (See Instructions) Property Management		9 Employer (See Instructions) Owner
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Maggie	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Self Employed
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Maggie	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Self Employed
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Maggie	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Self Employed
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Maggie	Amount of Contribution (\$) \$7.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/139 Rpt: 133/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitmire, Betty	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Sa, TX 78232	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitmire, Betty	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Sa, TX 78232	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitmire, Betty	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Sa, TX 78232	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitmire, Betty	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Sa, TX 78232	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitmire, Betty	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Sa, TX 78232	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/139 Rpt: 134/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Roxanne	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78248	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Roxanne	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Roxanne	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Roxanne	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Roxanne	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 132/139 Rpt: 135/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Roxanne	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78248	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Roxanne	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Roxanne	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Roxanne	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wills , Shirley	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Public Relations Consultant		Employer (See Instructions) Shirley Wills & Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 133/139 Rpt: 136/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wills , Shirley	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78209	
8 Principal occupation / Job title (See Instructions) Public Relations Consultant		9 Employer (See Instructions) Shirley Wills & Associates
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wills , Shirley	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Public Relations Consultant		Employer (See Instructions) Shirley Wills & Associates
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wills , Shirley	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Public Relations Consultant		Employer (See Instructions) Shirley Wills & Associates
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wills , Shirley	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Public Relations Consultant		Employer (See Instructions) Shirley Wills & Associates
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wills , Shirley	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Public Relations Consultant		Employer (See Instructions) Shirley Wills & Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/139 Rpt: 137/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wills , Shirley	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78209	
8 Principal occupation / Job title (See Instructions) Public Relations Consultant		9 Employer (See Instructions) Shirley Wills & Associates
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wills , Shirley	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Public Relations Consultant		Employer (See Instructions) Shirley Wills & Associates
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wills , Shirley	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Public Relations Consultant		Employer (See Instructions) Shirley Wills & Associates
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wills , Shirley	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Public Relations Consultant		Employer (See Instructions) Shirley Wills & Associates
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wills , Shirley	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Public Relations Consultant		Employer (See Instructions) Shirley Wills & Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/139 Rpt: 138/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Helen	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Castle Hills, TX 78213	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Helen	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Castle Hills, TX 78213	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Helen	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Castle Hills, TX 78213	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Helen	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Castle Hills, TX 78213	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Helen	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Castle Hills, TX 78213	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/139 Rpt: 139/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Helen	7 Amount of Contribution (\$) \$47.00
	6 Contributor address; City; State; Zip Code Castle Hills, TX 78213	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Helen	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Castle Hills, TX 78213	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yannuzzi, Joyce	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Houston, TX 77046	
Principal occupation / Job title (See Instructions) District Director		Employer (See Instructions) Senator Donna Campbell
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yawn, Julia (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248-1665	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yawn, Julia (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248-1665	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/139 Rpt: 140/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yawn, Julia (Mrs.)	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78248-1665	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yawn, Julia (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248-1665	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yawn, Julia (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248-1665	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yawn, Julia (Mrs.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248-1665	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZURITA, RITA	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code San Antonip, TX 78258	
Principal occupation / Job title (See Instructions) Travel Agent		Employer (See Instructions) Concierge Travel Agency

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 138/139 Rpt: 141/164	
2 FILER NAME Bexar County Republican Women PAC				3 Filer ID (Ethics Commission Filers) 00015597	
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZURITA, RITA	7 Amount of Contribution (\$) \$35.00			
	6 Contributor address; City; State; Zip Code San Antonip, TX 78258				
8 Principal occupation / Job title (See Instructions) Travel Agent		9 Employer (See Instructions) Concierge Travel Agency			
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zucco, Margaret	Amount of Contribution (\$) \$35.00			
	Contributor address; City; State; Zip Code Live Oak, TX 78233				
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)			
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zucco, Margaret	Amount of Contribution (\$) \$35.00			
	Contributor address; City; State; Zip Code Live Oak, TX 78233				
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)			
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zucco, Margaret	Amount of Contribution (\$) \$35.00			
	Contributor address; City; State; Zip Code Live Oak, TX 78233				
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)			
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zucco, Margaret	Amount of Contribution (\$) \$25.00			
	Contributor address; City; State; Zip Code Live Oak, TX 78233				
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 139/139 Rpt: 142/164
2 FILER NAME Bexar County Republican Women PAC			3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Full name of contributor Zucco, Margaret 6 Contributor address; City; State; Zip Code Live Oak, TX 78233	7 Amount of Contribution (\$) \$40.00	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
Date 10/10/2025	Full name of contributor Zucco, Margaret Contributor address; City; State; Zip Code Live Oak, TX 78233	Amount of Contribution (\$) \$35.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.			
2 FILER NAME Bexar County Republican Women PAC			
4 TOTAL OF UNITEMIZED PLEDGES \$ 0.00			
5 Date	6 Full name of pledgor 7 Pledgor Address; City; State; Zip Code	8 Amount of pledge (\$)	9 In-kind description (If applicable)
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 144/164
2 FILER NAME Bexar County Republican Women PAC		3 Filer ID (Ethics Commission Filers) 00015597
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account <input type="checkbox"/> (See Instructions)
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/11/2025	5 Payee name Amazon	
6 Amount (\$) \$148.23	7 Payee address; City; State; Zip Code 1200 12th Avenue South Suite 1200 Seattle, WA 98144	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Decorations and veteran pins for November luncheon reimbursed Nettie Lamerson, Hospitality
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/11/2025	Payee name Anne Marie's Catering	
Amount (\$) \$2,756.35	Payee address; City; State; Zip Code 12475 Starcrest Dr San Antonio, TX 78216	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense July general membership luncheon and fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/11/2025	Payee name Anne Marie's Catering	
Amount (\$) \$2,392.66	Payee address; City; State; Zip Code 12475 Starcrest Dr San Antonio, TX 78216	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense August General Membership Meeting and Luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/12/2025	5 Payee name Anne Marie's Catering	
6 Amount (\$) \$2,773.41	7 Payee address; City; 12475 Starcrest Dr San Antonio, TX 78216	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense September General Membership luncheon and fundraiser.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/10/2025	Payee name Anne Marie's Catering	
Amount (\$) \$2,329.53	Payee address; City; 12475 Starcrest Dr San Antonio, TX 78216	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense October General Membership Meeting and Luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/14/2025	Payee name Anne Marie's Catering	
Amount (\$) \$2,800.47	Payee address; City; 12475 Starcrest Dr San Antonio, TX 78216	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense November General membership meeting and luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597	
4 Date 12/12/2025	5 Payee name Anne Marie's Catering		
6 Amount (\$) \$3,118.10	7 Payee address; City; 12475 Starcrest Dr San Antonio, TX 78216	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense December General Membership Meeting and Luncheon	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/19/2025	Payee name Bling Name Badges, Inc		
Amount (\$) \$39.00	Payee address; City; 915 Bridge St Winston Salem, NC 27101	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name badges for new members	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/02/2025	Payee name Bling Name Badges, Inc		
Amount (\$) \$69.00	Payee address; City; 915 Bridge St Winston Salem, NC 27101	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name badges for new members.	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 11/28/2025	5 Payee name Bling Name Badges, Inc	
6 Amount (\$) \$99.00	7 Payee address; City; State; Zip Code 915 Bridge St Winston Salem, NC 27101	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Badges for new members
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/17/2025	Payee name Bling Name Badges, Inc	
Amount (\$) \$54.00	Payee address; City; State; Zip Code 915 Bridge St Winston Salem, NC 27101	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense New member name badges
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/11/2025	Payee name Chipotle Mexican Grill	
Amount (\$) \$27.26	Payee address; City; State; Zip Code 9944 Universal Blvd. Orlando, FL 32819	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal reimbursement during NFRW Convention to Yvonne Clouser, President
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597	
4 Date 12/11/2025	5 Payee name Cryderman's Barbeque		
6 Amount (\$) \$40.51	7 Payee address; City; 401 Florida Ave Cocoa, FL 32922	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Reimbursement during NFRW Convention reimbursed to Yvonne Clouser, President	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/10/2025	Payee name Dollar General Store		
Amount (\$) \$20.45	Payee address; City; 23960 FM 306 Canyon Lake, TX 78133	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Operating expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cards and Stamps for BCRW Correspondence, reimbursed to Christina Power, Committee Chair	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/11/2025	Payee name Dollar Tree		
Amount (\$) \$22.46	Payee address; City; 13430 San Pedro San Antonio, TX 78216	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense October Table Decorations for Luncheon, reimbursed to Nettie Lamerson, Hospitality	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Payee name FedEx	
6 Amount (\$) \$18.94	7 Payee address; City; State; Zip Code 14791 IH 35 N Ste 104 Selma, TX 78154	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Certificate and Frame for Teacher Award reimbursed to Lydia Mrzlak, Chair.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/01/2025	Payee name Frost Bank	
Amount (\$) \$5.00	Payee address; City; State; Zip Code 111 West Houston San Antonio, TX 78205	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank monthly service charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/01/2025	Payee name Frost Bank	
Amount (\$) \$5.00	Payee address; City; State; Zip Code 111 West Houston San Antonio, TX 78205	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank month service charge for August 2025
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/01/2025	5 Payee name Frost Bank	
6 Amount (\$) \$5.00	7 Payee address; City; 111 West Houston San Antonio, TX 78205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank monthly service charge
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/01/2025	Payee name Frost Bank	
Amount (\$) \$5.00	Payee address; City; 111 West Houston San Antonio, TX 78205	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense October monthly bank service charge.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/01/2025	Payee name Frost Bank	
Amount (\$) \$5.00	Payee address; City; 111 West Houston San Antonio, TX 78205	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense November monthly banking service charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/01/2025	5 Payee name Frost Bank	
6 Amount (\$) \$5.00	7 Payee address; City; State; Zip Code 111 West Houston San Antonio, TX 78205	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense December monthly banking service fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/09/2025	Payee name Gemini Web Development	
Amount (\$) \$49.46	Payee address; City; State; Zip Code 8719 Silver Quail San Antonio, TX 78250	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website maintenance payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/23/2025	Payee name GoDaddy Operating Company, LLC	
Amount (\$) \$76.62	Payee address; City; State; Zip Code 100 S. Mill Ave, Suite 1600 Tempe, AZ 85291	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Renewal of Microsoft 365 Email plus Security - BCRW President Email
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/25/2025	5 Payee name Harland Clarke	
6 Amount (\$) \$83.50	7 Payee address; City; State; Zip Code 15955 La Cantera Parkway San Antonio, TX 78256	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Checks ordered for PAC
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/16/2025	Payee name Harland Clarke	
Amount (\$) \$46.98	Payee address; City; State; Zip Code 15955 La Cantera Parkway San Antonio, TX 78256	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase Desk Compact Binder for new size checks
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/08/2025	Payee name Home Depot	
Amount (\$) \$160.71	Payee address; City; State; Zip Code 20740 US HWY 281 North San Antonio, TX 78259	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event decorations/table plants reimbursed to Charlyce Hamberg, VP Finance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/12/2025	5 Payee name National Federation for Republican Women	
6 Amount (\$) \$499.00	7 Payee address; City; State; Zip Code 124 N. Alfred Street Alexandria, VA 22314	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Registration fee for NFRW Convention, reimbursed to Yvonne Clouser, BCRW President
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/29/2025	Payee name Neiman Marcus Restaurant	
Amount (\$) \$1,587.07	Payee address; City; State; Zip Code 15900 La Cantera Pkwy, Ste 14 San Antonio, TX 78256	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 1st Ladies Brunch expense reimbursed to Shirley Wills, Chair
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/18/2025	Payee name PinCrafters	
Amount (\$) \$514.75	Payee address; City; State; Zip Code 45 Kilburn Street, Suite 232 Burlington, VT 05401	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 1ST Ladies pins awarded to members for donations, reimbursed to Shirley Wills, Chair, 1st Ladies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/10/2025	5 Payee name Priceline.com LLC	
6 Amount (\$) \$585.78	7 Payee address; City; State; Zip Code 800 CONNECTICUT AVENUE Norwalk, CT 06854	
<input type="checkbox"/> Expenditure from corporate funds	<p>8 PURPOSE OF EXPENDITURE</p> <p>(a) Category (See Categories listed at the top of this schedule) Event Expense</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Roundtrip airline tickets to NFRW Convention in Orlando, FL, reimbursement to Yvonne Clouser,</p>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/11/2025	Payee name Priceline.com LLC	Office held
Amount (\$) \$126.99	Payee address; City; State; Zip Code 800 CONNECTICUT AVENUE Norwalk, CT 06854	
<input type="checkbox"/> Expenditure from corporate funds	<p>PURPOSE OF EXPENDITURE</p> <p>(a) Category (See Categories listed at the top of this schedule) Event Expense</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Car rental expense during NFRW Convention reimbursed to Yvonne Clouser, President</p>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 10/10/2025	Payee name Rosen Shingle Creek Hotel	Office held
Amount (\$) \$1,098.52	Payee address; City; State; Zip Code 9939 Universal BLVD Orlando, FL 32819	
<input type="checkbox"/> Expenditure from corporate funds	<p>PURPOSE OF EXPENDITURE</p> <p>(a) Category (See Categories listed at the top of this schedule) Event Expense</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel expense for NFRW Convention, reimbursement to Yvonne Clouser, President</p>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/20/2025	5 Payee name Samaritan's Purse	
6 Amount (\$) \$565.00	7 Payee address; City; State; Zip Code PO Box 30000 Boone, NC 28607	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation for Kerrville Flood Victims Relief - Flood 7/4/2025
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/31/2025	Payee name Square Capital, LLC	
Amount (\$) \$63.44	Payee address; City; State; Zip Code 136 SOUTH MAIN STREET, SUITE 400 SALT LAKE CITY, TX 84101	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Member credit card transaction fees for July 2025
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name Square Capital, LLC	
Amount (\$) \$36.79	Payee address; City; State; Zip Code 136 SOUTH MAIN STREET, SUITE 400 SALT LAKE CITY, TX 84101	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction service charge for membership credit card payments
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 09/30/2025	5 Payee name Square Capital, LLC	
6 Amount (\$) \$64.97	7 Payee address; City; State; Zip Code 136 SOUTH MAIN STREET, SUITE 400 <input type="checkbox"/> Expenditure from corporate funds SALT LAKE CITY, TX 84101	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TOTAL SEPTEMBER 2025 transaction fees for members payments by credit cards
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/31/2025	Payee name Square Capital, LLC	
Amount (\$) \$69.44	Payee address; City; State; Zip Code 136 SOUTH MAIN STREET, SUITE 400 <input type="checkbox"/> Expenditure from corporate funds SALT LAKE CITY, TX 84101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Total October 2025 member credit card transaction fees for BCRW payments
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/30/2025	Payee name Square Capital, LLC	
Amount (\$) \$83.02	Payee address; City; State; Zip Code 136 SOUTH MAIN STREET, SUITE 400 <input type="checkbox"/> Expenditure from corporate funds SALT LAKE CITY, TX 84101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Total November 2025 membership transaction fees for credit card payments to BCRW
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/31/2025	5 Payee name Square Capital, LLC	
6 Amount (\$) \$99.77	7 Payee address; City; State; Zip Code 136 SOUTH MAIN STREET, SUITE 400 <input type="checkbox"/> Expenditure from corporate funds SALT LAKE CITY, TX 84101	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Total December 2025 transaction fees for members credit card fees for payments to BCRW
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/10/2025	Payee name Staples Retail Store 1879	
Amount (\$) \$27.20	Payee address; City; State; Zip Code 18203 RIM DRIVE 101 <input type="checkbox"/> Expenditure from corporate funds SAN ANTONIO, TX 78257	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing 2026 Membership forms, reimbursement to Heidi Price, VP Membership
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/25/2025	Payee name Texas A&M University	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 30013 <input type="checkbox"/> Expenditure from corporate funds College Station, TX 77842-3016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dwight D Eisenhower Scholarship awarded to Ella Shaw, ROTC Senior attending A&M University
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 07/23/2025	5 Payee name Texas Federation of Republican Women	
6 Amount (\$) \$278.30	7 Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership dues for Submission #13 for TFRW and NFRW
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/09/2025	Payee name Texas Federation of Republican Women	
Amount (\$) \$21.15	Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW DOWD scholarship donation, reimbursement to Yvonne Clouser, BCRW President
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/25/2025	Payee name Texas Federation of Republican Women	
Amount (\$) \$203.44	Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW 2025 Convention registration awarded to Carol Andrews, registration reimbursed to Andrews
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 08/08/2025	5 Payee name Texas Federation of Republican Women	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW Convention Sponsorship, Program AD and Exhibit Booth
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/16/2025	Payee name Texas Federation of Republican Women	
Amount (\$) \$101.20	Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues Submission #14 for TFRW and NFRW
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name Texas Federation of Republican Women	
Amount (\$) \$126.50	Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues Submission #15 for TFRW and NFRW
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 10/06/2025	5 Payee name Texas Federation of Republican Women	
6 Amount (\$) \$75.90	7 Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership dues for Submission #16 for TFRW and NFRW.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name Texas Federation of Republican Women	
Amount (\$) \$1,075.00	Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2026 service fee and membership dues for Submission #1 for TFRW and NFRW
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/28/2025	Payee name Texas Federation of Republican Women	
Amount (\$) \$809.60	Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2026 Membership Dues Submission #2 for TFRW and NFRW
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/18/2025	5 Payee name Texas Federation of Republican Women	
6 Amount (\$) \$26.35	7 Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense New 2026 President's pin for Shirley Wills, reimbursed Yvonne Clouser, Past President.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/26/2025	Payee name Texas Federation of Republican Women	
Amount (\$) \$480.70	Payee address; City; State; Zip Code PO Box 171146 Austin, TX 78717-0041	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2026 Membership Dues Submission #3 for TFRW and NFRW
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/18/2025	Payee name Walmart	
Amount (\$) \$102.75	Payee address; City; State; Zip Code 24403 W Interstate 10 San Antonio, TX 78257	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printer Ink toner replacement, reimbursed to Yvonne Clouser, President
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597
4 Date 12/18/2025	5 Payee name Women's Club of San Antonio	
6 Amount (\$) \$483.50	7 Payee address; City; State; Zip Code 1717 San Pedro San Antonio, TX 78212	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 1st Ladies Event - Christmas Faire & Luncheon, reimbursement to Shirley Wills, Chair, 1st Ladies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/28/2025	Payee name Wreaths Across America	
Amount (\$) \$867.00	Payee address; City; State; Zip Code PO Box 249 Columbus Falls, ME 04623	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership donation to honor those who served our country and are buried at national cemeteries
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/10/2025	Payee name Wreaths Across America	
Amount (\$) \$2,499.00	Payee address; City; State; Zip Code PO Box 249 Columbus Falls, ME 04623	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to honor those who served our country and are buried at national cemeteries
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/20 Rpt:	2 FILER NAME Bexar County Republican Women PAC	3 Filer ID (Ethics Commission Filers) 00015597	
4 Date 12/10/2025	5 Payee name Wreaths Across America		
6 Amount (\$) \$16.99	7 Payee address; City; PO Box 249 Columbus Falls, ME 04623	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ornament gift of appreciation to County Commissioner PCT 3 Grant Moody's, reimbursed	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held