

**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) 00054427 | 2 Total pages filed: 42 | | |
| 3 COMMITTEE NAME Greater Houston Council of Federated Republican Women | | OFFICE USE ONLY <p>Date Received ELECTRONICALLY FILED 01/03/2026</p> <p>Date Hand-delivered or Date Postmarked</p> <table border="1"> <tr> <td>Receipt #</td> <td>Amount</td> </tr> </table> <p>Date Processed</p> <p>Date Imaged</p> | | Receipt # | Amount |
| Receipt # | Amount | | | | |
| 4 COMMITTEE ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7941 Katy Freeway #272 <input type="checkbox"/> Change of Address Houston, TX 77024 | | | | | |
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| 5 CAMPAIGN TREASURER NAME MS / MRS / MR Mrs. Micheline F. | FIRST NICKNAME LAST SUFFIX | | | | |
| 6 CAMPAIGN TREASURER STREET ADDRESS STREET ADDRESS (NO PO BOX PLEASE); (Residence or Business) 1910 Fawn Way Ct Richmond, TX 77406 | APT / SUITE #; | CITY; | STATE; ZIP CODE | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address STREET OR PO BOX; 11007 Wortham Blvd. Houston, TX 77065 | APT / SUITE #; | CITY; | STATE; ZIP CODE | | |
| 8 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION (281) 723-3718 | | | | | |
| 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 Day Year 07/01/2025 | Month Day Year THROUGH 12/31/2025 | | | |
| 11 ELECTION | ELECTION DATE Month Day Year | ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | | | |

GO TO PAGE 2

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

**FORM GPAC
COVER SHEET PG 2**

| | | |
|---|---|---|
| 12 COMMITTEE NAME Greater Houston Council of Federated Republican Women | | 13 FILER ID (Ethics Commission Filers) 00054427 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | | |
| 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 22,775.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 36.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 14,919.87 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mrs. Micheline F. Hutson

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 42

| | |
|---|--|
| 17 COMMITTEE NAME Greater Houston Council of Federated Republican Women | 18 Filer ID (Ethics Commission Filers) 00054427 |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | |
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 21,675.00 | |
| 2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 1,100.00 | |
| 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 \$ 14,919.87 | |
| 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: 1/23 Rpt: 4/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/26/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Cheryl | 7 Amount of Contribution (\$) \$20.00 |
| | 6 Contributor address; City; State; Zip Code Kingwood, TX 77345 | |
| 8 Principal occupation / Job title (See Instructions) Self-employed | | 9 Employer (See Instructions) |
| Date 08/13/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balido, Jennifer | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75229 | |
| Principal occupation / Job title (See Instructions) Judge | | Employer (See Instructions) Texas Court of Appeals |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broussard, Janice | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code Pearland, TX 77581 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 08/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Linda | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code Bayou Vista, TX 77563 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Linda | Amount of Contribution (\$) \$70.00 |
| | Contributor address; City; State; Zip Code Bayou Vista, TX 77563 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/23 Rpt: 5/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/26/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burg, Pam | 7 Amount of Contribution (\$) \$50.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77019 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byers, Amy | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code Conroe, TX 77304 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 09/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byers, Amy | Amount of Contribution (\$) \$20.00 |
| | Contributor address; City; State; Zip Code Conroe, TX 77304 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 12/02/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byers, Amy | Amount of Contribution (\$) \$45.00 |
| | Contributor address; City; State; Zip Code Conroe, TX 77304 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 08/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caird, Jessica | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code Humble, TX 77345 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/23 Rpt: 6/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/26/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calvert, Cynthia | 7 Amount of Contribution (\$) \$45.00 |
| | 6 Contributor address; City; State; Zip Code Kingwood, TX 77345 | |
| 8 Principal occupation / Job title (See Instructions) District Director | | 9 Employer (See Instructions) TFRW |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cambio, Kaaren | Amount of Contribution (\$) \$20.00 |
| | Contributor address; City; State; Zip Code Montgomery, TX 77356 | |
| 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#: _____) Campo, Heather | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code Pearland, TX 77581 | |
| 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#: _____) Cantrell, Alicia | Amount of Contribution (\$) \$45.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77401 | |
| Principal occupation / Job title (See Instructions) volunteer | | Employer (See Instructions) |
| Date 12/02/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantrell, Alicia | Amount of Contribution (\$) \$45.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77401 | |
| Principal occupation / Job title (See Instructions) volunteer | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/23 Rpt: 7/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/18/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Thelma | 7 Amount of Contribution (\$) \$425.00 |
| | 6 Contributor address; City; State; Zip Code SugarLand, TX 77479 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cintron, Susan | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Kingwood, TX 77345 | |
| Principal occupation / Job title (See Instructions) Realtor | | Employer (See Instructions) Self-employed |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowell, Ronnye | Amount of Contribution (\$) \$45.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77024 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowell, Ronnye | Amount of Contribution (\$) \$45.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77024 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowell, Ronnye | Amount of Contribution (\$) \$45.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77024 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/23 Rpt: 8/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 07/31/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crenshaw, Jazlynn | 7 Amount of Contribution (\$) \$2,000.00 |
| | 6 Contributor address; City; State; Zip Code Katy, TX 77450 | |
| 8 Principal occupation / Job title (See Instructions) Unknown | | 9 Employer (See Instructions) State of Texas |
| Date 07/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cristi Craddick Campaign | Amount of Contribution (\$) \$3,000.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78703 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 07/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CyFair Republican Women | Amount of Contribution (\$) \$750.00 |
| | Contributor address; City; State; Zip Code Cypress, TX 77433 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 08/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Mary | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code Bayou Vista, TX 77563 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) None |
| Date 08/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duty, Cynthia | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code Hitchcock, TX 77563 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/23 Rpt: 9/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/07/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eagan, John | 7 Amount of Contribution (\$) \$85.00 |
| | 6 Contributor address; City; State; Zip Code Austin, TX 78750 | |
| 8 Principal occupation / Job title (See Instructions) Consultant | | 9 Employer (See Instructions) Bull Creek Strategies |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellsworth, Donna | Amount of Contribution (\$) \$20.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77068 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) |
| Date 12/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fort Bend Republican Women | Amount of Contribution (\$) \$30.00 |
| | Contributor address; City; State; Zip Code Richmond, TX 77406 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Gay | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77069 | |
| 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#: _____) Garrett, Kellye Duncan | Amount of Contribution (\$) \$165.00 |
| | Contributor address; City; State; Zip Code San Angelo, TX 76904 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/23 Rpt: 10/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/12/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Tina | 7 Amount of Contribution (\$) \$85.00 |
| | 6 Contributor address; City; State; Zip Code Sugar Land, TX 77498 | |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Tina | Amount of Contribution (\$) \$110.00 |
| | Contributor address; City; State; Zip Code Sugar Land, TX 77498 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) |
| Date 11/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Tina | Amount of Contribution (\$) \$45.00 |
| | Contributor address; City; State; Zip Code Sugar Land, TX 77498 | |
| 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#: _____) Gilmore, Lisa | Amount of Contribution (\$) \$20.00 |
| | Contributor address; City; State; Zip Code Spring, TX 77381 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 08/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guiney, Kristin | Amount of Contribution (\$) \$170.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77079 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/23 Rpt: 11/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/07/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haar, Jennifer | 7 Amount of Contribution (\$) \$85.00 |
| | 6 Contributor address; City; State; Zip Code Katy, TX 77497 | |
| 8 Principal occupation / Job title (See Instructions) realtor | | 9 Employer (See Instructions) |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haar, Jennifer | Amount of Contribution (\$) \$70.00 |
| | Contributor address; City; State; Zip Code Katy, TX 77497 | |
| Principal occupation / Job title (See Instructions) realtor | | Employer (See Instructions) |
| Date 08/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Marcy | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code Galveston, TX 77551 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 08/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauser, Barbara | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77056 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 08/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Elaine | Amount of Contribution (\$) \$750.00 |
| | Contributor address; City; State; Zip Code Beaumont, TX 77706 | |
| Principal occupation / Job title (See Instructions) Partner | | Employer (See Instructions) UCB |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/23 Rpt: 12/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/26/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Betty 6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 08/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Irene Contributor address; City; State; Zip Code Bayou Vista, TX 77563 | Amount of Contribution (\$) \$85.00 |
| 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#: _____) Henry, Irene Contributor address; City; State; Zip Code Bayou Vista, TX 77563 | Amount of Contribution (\$) \$70.00 |
| 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#: _____) Hodges, Stephanie Contributor address; City; State; Zip Code Kingwood, TX 77345 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Global Finance | | Employer (See Instructions) O&G |
| Date 07/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holsinger, Cindy Contributor address; City; State; Zip Code Trinity, TX 75862 | Amount of Contribution (\$) \$85.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/23 Rpt: 13/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/26/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holsinger, Cindy 6 Contributor address; City; State; Zip Code Trinity, TX 75862 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) |
| Date 08/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Warren Contributor address; City; State; Zip Code Houston, TX 77084 | Amount of Contribution (\$) \$340.00 |
| 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#: _____) Huffman, Mary Contributor address; City; State; Zip Code Houston, TX 77042 | Amount of Contribution (\$) \$90.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 09/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Humble, Margaret Contributor address; City; State; Zip Code Humble, TX 77344 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 08/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingersoll, Elizabeth Contributor address; City; State; Zip Code Houston, TX 77080 | Amount of Contribution (\$) \$85.00 |
| 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: 11/23 Rpt: 14/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/28/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingersoll, Elizabeth | 7 Amount of Contribution (\$) \$85.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77080 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 08/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jewell, Kevin | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77009-7131 | |
| Principal occupation / Job title (See Instructions) Judge | | Employer (See Instructions) Texas Court of Appeals |
| Date 09/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimmerson, Melanie | Amount of Contribution (\$) \$20.00 |
| | Contributor address; City; State; Zip Code Baytown, TX 77521 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 12/02/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kindred, Betsy | Amount of Contribution (\$) \$45.00 |
| | Contributor address; City; State; Zip Code Pearland, TX 77581 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) |
| Date 08/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingwood Area Republican Womens Club | Amount of Contribution (\$) \$750.00 |
| | Contributor address; City; State; Zip Code Kingwood, TX 77325 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/23 Rpt: 15/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/07/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirbie, Tina | 7 Amount of Contribution (\$) \$170.00 |
| | 6 Contributor address; City; State; Zip Code Friendswood, TX 77546 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 07/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Roxann | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code League City, TX 77573 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Roxann | Amount of Contribution (\$) \$70.00 |
| | Contributor address; City; State; Zip Code League City, TX 77573 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 08/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liles, Charlotte | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77069 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 09/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lojo, Wendi | Amount of Contribution (\$) \$20.00 |
| | Contributor address; City; State; Zip Code SugarLand, TX 77478 | |
| Principal occupation / Job title (See Instructions) Secretary | | Employer (See Instructions) Joan Huffman's Office |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 13/23 Rpt: 16/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/26/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mafrige, Sophia (Ms.) | 7 Amount of Contribution (\$) \$75.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77024 | |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 12/02/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mafrige, Sophia (Ms.) | Amount of Contribution (\$) \$45.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77024 | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 07/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magic Circle Republican Women | Amount of Contribution (\$) \$750.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77005 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 07/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magic Circle Republican Women | Amount of Contribution (\$) \$750.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77005 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 08/13/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magic Circle Republican Women | Amount of Contribution (\$) \$750.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77005 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 14/23 Rpt: 17/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 07/22/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Kathy | 7 Amount of Contribution (\$) \$750.00 |
| | 6 Contributor address; City; State; Zip Code Spring, TX 77379 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Marga | Amount of Contribution (\$) \$20.00 |
| | Contributor address; City; State; Zip Code Baytown, TX 77520 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) |
| Date 11/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Marga | Amount of Contribution (\$) \$45.00 |
| | Contributor address; City; State; Zip Code Baytown, TX 77520 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) |
| Date 08/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarty, Alexis | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code Richmond, TX 77407 | |
| Principal occupation / Job title (See Instructions) Realtor | | Employer (See Instructions) McCarty Real Estate |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McHattie, Emely | Amount of Contribution (\$) \$80.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77041 | |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Shea Writing & Training Solutions |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 15/23 Rpt: 18/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 12/02/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McHattie, Emely 6 Contributor address; City; State; Zip Code Houston, TX 77041 | 7 Amount of Contribution (\$) \$45.00 |
| 8 Principal occupation / Job title (See Instructions) Consultant | | 9 Employer (See Instructions) Shea Writing & Training Solutions |
| Date 07/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeil, Sandrra Contributor address; City; State; Zip Code League City, TX 77573-4409 | Amount of Contribution (\$) \$85.00 |
| 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#: _____) McNeil, Sandrra Contributor address; City; State; Zip Code League City, TX 77573-4409 | Amount of Contribution (\$) \$70.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 07/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Memorial West Republican Women Contributor address; City; State; Zip Code Houston, TX 77042 | Amount of Contribution (\$) \$750.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, Mayes Contributor address; City; State; Zip Code Galveston, TX 77550 | Amount of Contribution (\$) \$85.00 |
| Principal occupation / Job title (See Instructions) State Representative | | Employer (See Instructions) State of Texas |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 16/23 Rpt: 19/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 09/16/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Odom, Venita | 7 Amount of Contribution (\$) \$20.00 |
| | 6 Contributor address; City; State; Zip Code Spring, TX 77379 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 09/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omoruyi, Kenneth | Amount of Contribution (\$) \$170.00 |
| | Contributor address; City; State; Zip Code SugarLand, TX 77478 | |
| Principal occupation / Job title (See Instructions) CPA | | Employer (See Instructions) Volunteer |
| Date 07/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Gina | Amount of Contribution (\$) \$170.00 |
| | Contributor address; City; State; Zip Code Waco, TX 76710 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 08/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Platsas, Angela | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77008 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 08/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radcliffe, Nancy | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code Tomball, TX 77375 | |
| Principal occupation / Job title (See Instructions) Educational Consultant | | Employer (See Instructions) Radcliffe Resources |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 17/23 Rpt: 20/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/22/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radcliffe, Nancy 6 Contributor address; City; State; Zip Code Tomball, TX 77375 | 7 Amount of Contribution (\$) \$85.00 |
| 8 Principal occupation / Job title (See Instructions) Educational Consultant | | 9 Employer (See Instructions) Radcliffe Resources |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Julian Contributor address; City; State; Zip Code Houston, TX 77024 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Ramirez Law |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rinn, Diane Contributor address; City; State; Zip Code Freeport, TX 77541 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 08/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rinn, Mary Contributor address; City; State; Zip Code Freeport, TX 77541 | Amount of Contribution (\$) \$85.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 08/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sage, Mary Contributor address; City; State; Zip Code Houston, TX 77042 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 18/23 Rpt: 21/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 12/02/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sage, Mary 6 Contributor address; City; State; Zip Code Houston, TX 77042 | 7 Amount of Contribution (\$) \$45.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandlin, Tere Contributor address; City; State; Zip Code Lake Jackson, TX 77566 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) |
| Date 08/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Tom Contributor address; City; State; Zip Code Addison, TX 75001 | Amount of Contribution (\$) \$85.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 08/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SoRivera Strategies Contributor address; City; State; Zip Code Houston, TX 77009 | Amount of Contribution (\$) \$85.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 07/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Valerie (Ms.) Contributor address; City; State; Zip Code Spring, TX 77389 | Amount of Contribution (\$) \$170.00 |
| Principal occupation / Job title (See Instructions) Repreentative | | Employer (See Instructions) State of Texas |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 19/23 Rpt: 22/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/26/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Trish | 7 Amount of Contribution (\$) \$50.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77057 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 07/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Joan Huffman | Amount of Contribution (\$) \$2,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77043 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Shannon | Amount of Contribution (\$) \$45.00 |
| | Contributor address; City; State; Zip Code Kingwood, TX 77345 | |
| Principal occupation / Job title (See Instructions) Mom | | Employer (See Instructions) |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zachary, Linda | Amount of Contribution (\$) \$45.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77095 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 07/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) baker, gayla | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code Lake Jackson, TX 77566 | |
| 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: 20/23 Rpt: 23/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/26/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) chambers, joyce 6 Contributor address; City; State; Zip Code kingwood, TX 77359 | 7 Amount of Contribution (\$) \$70.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) |
| Date 08/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) cohen, tina Contributor address; City; State; Zip Code bellaire, TX 77401 | Amount of Contribution (\$) \$170.00 |
| 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#: _____) farabee, sherry Contributor address; City; State; Zip Code houston, TX 77095 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) homemaker | | Employer (See Instructions) |
| Date 08/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gremminger, Lois Contributor address; City; State; Zip Code Richmond, TX 77406 | Amount of Contribution (\$) \$85.00 |
| 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#: _____) gremminger, Lois Contributor address; City; State; Zip Code Richmond, TX 77406 | Amount of Contribution (\$) \$75.00 |
| 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: 21/23 Rpt: 24/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 12/02/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gremminger, Lois 6 Contributor address; City; State; Zip Code Richmond, TX 77406 | 7 Amount of Contribution (\$) \$45.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) henderson, elaine Contributor address; City; State; Zip Code beaumont, TX 77433 | Amount of Contribution (\$) \$220.00 |
| Principal occupation / Job title (See Instructions) partner | | Employer (See Instructions) ucb |
| Date 08/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kindred, elizabeth Contributor address; City; State; Zip Code Pearland, TX 77581 | Amount of Contribution (\$) \$85.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 08/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunsford, renee Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340 | Amount of Contribution (\$) \$85.00 |
| Principal occupation / Job title (See Instructions) RETIRED | | Employer (See Instructions) RETIRED |
| Date 08/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunsford, renee Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340 | Amount of Contribution (\$) \$80.00 |
| Principal occupation / Job title (See Instructions) RETIRED | | Employer (See Instructions) RETIRED |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 22/23 Rpt: 25/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/26/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunsford, renee | 7 Amount of Contribution (\$) \$20.00 |
| | 6 Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340 | |
| 8 Principal occupation / Job title (See Instructions) RETIRED | | 9 Employer (See Instructions) RETIRED |
| Date 12/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunsford, renee | Amount of Contribution (\$) \$45.00 |
| | Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340 | |
| Principal occupation / Job title (See Instructions) RETIRED | | Employer (See Instructions) RETIRED |
| Date 08/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) moffett, marie | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code sugar land, TX 77479 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) |
| Date 08/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) radack, steve | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code houston, TX 77224 | |
| Principal occupation / Job title (See Instructions) commissioner | | Employer (See Instructions) harris county |
| Date 08/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) rigsby, jane | Amount of Contribution (\$) \$85.00 |
| | Contributor address; City; State; Zip Code Bayou Vista, TX 77563 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) |
| | | |

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

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|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 23/23 Rpt: 26/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/26/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) rigsby, jane 6 Contributor address; City; State; Zip Code Bayou Vista, TX 77563 | 7 Amount of Contribution (\$) \$20.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | | |
|---|--|---|--|---|
| <p>The Instruction Guide explains how to complete this form.</p> | | | | <p>1 Total pages Schedule A2: Sch: 1/2 Rpt: 27/42</p> |
| <p>2 FILER NAME Greater Houston Council of Federated Republican Women</p> | | | | <p>3 Filer ID (Ethics Commission Filers) 00054427</p> |
| <p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p> | | | | \$ |
| <p>5 Date 08/26/2025</p> | <p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Byers, Amy</p> <p>7 Contributor address; City; State; Zip Code Conroe, TX 77304</p> | | | <p>8 Amount of contribution (\$) \$25.00</p> <p>9 In-kind contribution description Table signage</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p> |
| <p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired</p> | | <p>11 Employer (FOR NON-JUDICIAL) (See instructions) Retired</p> | | |
| <p>12 Contributor's principal occupation (FOR JUDICIAL)</p> | | <p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p> | | |
| <p>14 Contributor's employer/law firm (FOR JUDICIAL)</p> | | <p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p> | | |
| <p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p> | | | | |
| <p>Date 08/26/2025</p> | <p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Cintron, Susan</p> <p>Contributor address; City; State; Zip Code Kingwood, TX 77345</p> | | | <p>Amount of contribution (\$) \$500.00</p> <p>In-kind contribution description Scarves</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p> |
| <p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Realtor</p> | | <p>Employer (FOR NON-JUDICIAL) (See instructions) Self-employed</p> | | |
| <p>Contributor's principal occupation (FOR JUDICIAL)</p> | | <p>Contributor's job title (FOR JUDICIAL) (See instructions)</p> | | |
| <p>Contributor's employer/law firm (FOR JUDICIAL)</p> | | <p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p> | | |
| <p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p> | | | | |
| <p>Date 08/26/2025</p> | <p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Gibson, Tina</p> <p>Contributor address; City; State; Zip Code Sugar Land, TX 77498</p> | | | <p>Amount of contribution (\$) \$300.00</p> <p>In-kind contribution description Centerpieces and plants</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p> |
| <p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) retired</p> | | <p>Employer (FOR NON-JUDICIAL) (See instructions)</p> | | |
| <p>Contributor's principal occupation (FOR JUDICIAL)</p> | | <p>Contributor's job title (FOR JUDICIAL) (See instructions)</p> | | |
| <p>Contributor's employer/law firm (FOR JUDICIAL)</p> | | <p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p> | | |
| <p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p> | | | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | | |
|--|--|--|---|--|
| <p>The Instruction Guide explains how to complete this form.</p> | | | | <p>1 Total pages Schedule A2: Sch: 2/2 Rpt: 28/42</p> |
| <p>2 FILER NAME Greater Houston Council of Federated Republican Women</p> | | | | <p>3 Filer ID (Ethics Commission Filers) 00054427</p> |
| <p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p> | | | | \$ |
| <p>5 Date 08/26/2025</p> | <p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunsford, renee</p> <p>7 Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340</p> | | | <p>8 Amount of contribution (\$) \$125.00</p> <p>9 In-kind contribution description Bags and paper for purses</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p> |
| <p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) RETIRED</p> | | | <p>11 Employer (FOR NON-JUDICIAL) (See instructions) RETIRED</p> | |
| <p>12 Contributor's principal occupation (FOR JUDICIAL)</p> | | | <p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p> | |
| <p>14 Contributor's employer/law firm (FOR JUDICIAL)</p> | | | <p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p> | |
| <p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p> | | | | |
| <p>Date 08/26/2025</p> | <p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) radcliffe, nancy</p> <p>Contributor address; City; State; Zip Code the woodlands, TX 77375</p> | | | <p>Amount of contribution (\$) \$150.00</p> <p>In-kind contribution description Speaker travel expenses, door prizes, and hat award</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p> |
| <p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) educational consultant</p> | | | <p>Employer (FOR NON-JUDICIAL) (See instructions) radcliffe resources</p> | |
| <p>Contributor's principal occupation (FOR JUDICIAL)</p> | | | <p>Contributor's job title (FOR JUDICIAL) (See instructions)</p> | |
| <p>Contributor's employer/law firm (FOR JUDICIAL)</p> | | | <p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p> | |
| <p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p> | | | | |

PLEDGED CONTRIBUTIONS

SCHEDULE B

| | | | |
|--|---|---|---|
| The Instruction Guide explains how to complete this form. | | | |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 1 Total pages Schedule B: Sch: 1/1 Rpt: 29/42 | |
| 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: 30/42 |
| 2 FILER NAME Greater Houston Council of Federated Republican Women | | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 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 (See Instructions) <input type="checkbox"/> |
| 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: 1/12 Rpt: 31/42 | 2 FILER NAME Greater Houston Council of Federated Republican Women | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 12/02/2025 | 5 Payee name 401 Table and Tap | |
| 6 Amount (\$) \$1,259.44 | 7 Payee address; City; 6700 Ferris St Bellaire, TX 77401 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Christmas Luncheon for board |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/26/2025 | Payee name Becerra, Gabriel | |
| Amount (\$) \$160.00 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Humble, TX 77338 | |
| <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 Security at event |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/19/2025 | Payee name Byers, Amy | |
| Amount (\$) \$97.41 | Payee address; City; State; Zip Code 4851 W Fork Blvd Conroe, TX 77304 | |
| <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 Badge printing reimbursement |
| 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: 2/12 Rpt: 32/42 | 2 FILER NAME Greater Houston Council of Federated Republican Women | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/26/2025 | 5 Payee name Byers, Amy | |
| 6 Amount (\$) \$238.00 | 7 Payee address; City; State; Zip Code 4851 W Fork Blvd Conroe, TX 77304 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of programs for events |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/02/2025 | Payee name CVS Pharmacy | |
| Amount (\$) \$253.12 | Payee address; City; State; Zip Code 11950 Mason Rd richmond, TX 77469 | |
| <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 thank you gift cards |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/08/2025 | Payee name Cintron, Susie | |
| Amount (\$) \$78.31 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Kingwood, TX 77345 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage |
| 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: 3/12 Rpt: 33/42 | 2 FILER NAME Greater Houston Council of Federated Republican Women | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 12/08/2025 | 5 Payee name Cintron, Susie | |
| 6 Amount (\$) \$124.47 | 7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Kingwood, TX 77345 | |
| 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 Flowers for funeral |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/04/2025 | Payee name Constant Contact | |
| Amount (\$) \$36.75 | Payee address; City; State; Zip Code 1601 Trapelo Rd Waltham, MA 02451 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Communication | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bulk communication vendor |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/04/2025 | Payee name Constant Contact | |
| Amount (\$) \$36.75 | Payee address; City; State; Zip Code 1601 Trapelo Rd Waltham, MA 02451 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Communications | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communication by bulk |
| 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: 4/12 Rpt: 34/42 | 2 FILER NAME Greater Houston Council of Federated Republican Women | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 10/08/2025 | 5 Payee name Constant Contact | |
| 6 Amount (\$) \$36.75 | 7 Payee address; City; State; Zip Code 1601 Trapelo Rd Waltham, MA 02451 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Communication | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bulk Communications |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/04/2025 | Payee name Constant Contact | |
| Amount (\$) \$36.75 | Payee address; City; State; Zip Code 1601 Trapelo Rd Waltham, MA 02451 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Communications | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bulk Communication vendor |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/04/2025 | Payee name Constant Contact | |
| Amount (\$) \$36.75 | Payee address; City; State; Zip Code 1601 Trapelo Rd Waltham, MA 02451 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Communications | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bulk communications |
| 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: 5/12 Rpt: 35/42 | 2 FILER NAME Greater Houston Council of Federated Republican Women | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 07/14/2025 | 5 Payee name ExtraSpace Storage | |
| 6 Amount (\$) \$108.00 | 7 Payee address; City; 7879 Katy Fwy Houston, TX 77024 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage space |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/16/2025 | Payee name ExtraSpace Storage | |
| Amount (\$) \$108.00 | Payee address; City; 7879 Katy Fwy Houston, TX 77024 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage rent |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/17/2025 | Payee name ExtraSpace Storage | |
| Amount (\$) \$108.00 | Payee address; City; 7879 Katy Fwy Houston, TX 77024 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage |
| 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: 6/12 Rpt: 36/42 | 2 FILER NAME Greater Houston Council of Federated Republican Women | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 10/20/2025 | 5 Payee name ExtraSpace Storage | |
| 6 Amount (\$) \$108.00 | 7 Payee address; City; 7879 Katy Fwy Houston, TX 77024 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage space |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/20/2025 | Payee name ExtraSpace Storage | |
| Amount (\$) \$125.00 | Payee address; City; 7879 Katy Fwy Houston, TX 77024 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/14/2025 | Payee name ExtraSpace Storage | |
| Amount (\$) \$125.00 | Payee address; City; 7879 Katy Fwy Houston, TX 77024 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage |
| 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: 7/12 Rpt: 37/42 | 2 FILER NAME Greater Houston Council of Federated Republican Women | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/07/2025 | 5 Payee name Gibson, Tina | |
| 6 Amount (\$) \$656.00 | 7 Payee address; City; 911 Mill Pond Dr SugarLand, TX 77498 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Club President's luncheon |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Gibson, Tina | Office sought Office held |
| Date 10/07/2025 | Payee name Gibson, Tina | |
| Amount (\$) \$250.00 | Payee address; City; 911 Mill Pond Dr SugarLand, TX 77498 | |
| <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 Reimbursement for deposit paid for board luncheon |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Gremminger, Lois | Office sought Office held |
| Date 08/04/2025 | Payee name Gremminger, Lois | |
| Amount (\$) \$34.28 | Payee address; City; 1910 Fawn Way Ct Richmond, TX 77406 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Treasurer office supplies |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Gremminger, Lois | 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: 8/12 Rpt: 38/42 | 2 FILER NAME Greater Houston Council of Federated Republican Women | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 12/02/2025 | 5 Payee name H-E-B | |
| 6 Amount (\$) \$10.80 | 7 Payee address; City; State; Zip Code 530 Hwy 6 Sugar Land, TX 77479 | |
| 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 thank you flowers |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 07/10/2025 | Payee name K&K Insurance Group, Inc. | |
| Amount (\$) \$199.00 | Payee address; City; State; Zip Code 1712 Magnavox Way Fort Wayne, IN 46804 | |
| PURPOSE OF EXPENDITURE | (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 insurance coverage for event |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/08/2025 | Payee name McHattie, Emelie | |
| Amount (\$) \$941.54 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Houston, TX 77241 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW Convention member appreciation event |
| 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: 9/12 Rpt: 39/42 | 2 FILER NAME Greater Houston Council of Federated Republican Women | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/25/2025 | 5 Payee name Moments by KD Photography | |
| 6 Amount (\$) \$425.00 | 7 Payee address; City; State; Zip Code 681 Birchwood Dr Port Neches, TX 77651 | |
| <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 Photographer |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 07/09/2025 | Payee name Pay Pal | |
| Amount (\$) \$100.84 | Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95731 | |
| <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 Event ticket fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/30/2025 | Payee name Pay Pal | |
| Amount (\$) \$239.18 | Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95731 | |
| <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 Credit card fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 10/12 Rpt: 40/42 | 2 FILER NAME Greater Houston Council of Federated Republican Women | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 09/30/2025 | 5 Payee name Pay Pal | |
| 6 Amount (\$) \$11.52 | 7 Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95731 | |
| <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 Fee for Credit card use |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/17/2025 | Payee name Pay Pal | |
| Amount (\$) \$9.42 | Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95731 | |
| <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 Credit Card usage fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/31/2025 | Payee name Pay Pal | |
| Amount (\$) \$9.42 | Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95731 | |
| <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 Credit card fee |
| 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: 11/12 Rpt: 41/42 | 2 FILER NAME Greater Houston Council of Federated Republican Women | 3 Filer ID (Ethics Commission Filers) 00054427 |
| 4 Date 08/19/2025 | 5 Payee name Radcliffe, Nancy | |
| 6 Amount (\$) \$149.37 | 7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE The Woodlands, TX 77375 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Speaker gifts |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/04/2025 | Payee name Texas Federation of Republican Women | |
| Amount (\$) \$925.00 | Payee address; City; State; Zip Code 1301 Vista Del Monte <input type="checkbox"/> Expenditure from corporate funds San Antonio, TX 78216 | |
| PURPOSE OF EXPENDITURE | (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 Convention ad in program |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/26/2025 | Payee name Texas Webmaster, LLC | |
| Amount (\$) \$840.00 | Payee address; City; State; Zip Code 18209 Bounds Drive <input type="checkbox"/> Expenditure from corporate funds Pearland, TX 77584 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting 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 management |
| 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: 12/12 Rpt: 42/42 | 2 FILER NAME Greater Houston Council of Federated Republican Women | 3 Filer ID (Ethics Commission Filers) 00054427 | |
| 4 Date 08/26/2025 | 5 Payee name The Ballroom of Tanglewood | | |
| 6 Amount (\$) \$7,006.00 | 7 Payee address; City; State; Zip Code 5430 Westheimer Way Houston, TX 77056 | | |
| <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 Venue and lunch | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |