

**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) 00090574	2 Total pages filed: 9			
3 COMMITTEE NAME Liberty Hill Republican Women		OFFICE USE ONLY <p>Date Received ELECTRONICALLY FILED 01/14/2026</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 <input type="checkbox"/> Change of Address 2655 Ranch Rd 1869 unit# 656 Liberty Hill, TX 78642						
5 CAMPAIGN TREASURER NAME Mrs.	FIRST Nicole	MI				
	NICKNAME Kidd	LAST SUFFIX				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 512 Great Lawn Cv. LH, TX 78642	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 512 Great Lawn Cv. LH, TX 78642	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE (530) 517-3001	PHONE NUMBER	EXTENSION			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15	<input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff	<input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination			
10 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
11 ELECTION	ELECTION DATE Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> General	ELECTION TYPE <input type="checkbox"/> Runoff <input type="checkbox"/> Special	<input type="checkbox"/> Other		

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

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Liberty Hill Republican Women		13 FILER ID (Ethics Commission Filers) 00090574
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 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)	\$ 1,270.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,077.97
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. Nicole Kidd

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 9

17 COMMITTEE NAME Liberty Hill Republican Women	18 Filer ID (Ethics Commission Filers) 00090574
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 1,270.00	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS \$	
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
6. <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
7. <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
8. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
9. <input type="checkbox"/> SCHEDULE E: LOANS \$	
10. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$	
14. <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 192.03	
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: 1/5 Rpt: 4/9
2 FILER NAME Liberty Hill Republican Women		3 Filer ID (Ethics Commission Filers) 00090574
4 Date 11/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bond, Erica	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Georgetown , TX 78628	
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Self
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brindley, Dawn	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Liberty Hill, TX 78642	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, Shannon	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean, Angela	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Liberty Hill, TX 78642	
Principal occupation / Job title (See Instructions) Commercial Real estate		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ducoty, Brenda	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) n/a

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/9
2 FILER NAME Liberty Hill Republican Women		3 Filer ID (Ethics Commission Filers) 00090574
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ealy, Lockie	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Liberty Hill, TX 78642	
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easterling, Wendy	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Liberty Hill, TX 78642	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geisheimer, Jennifer (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Leander, TX 78641	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Shauna	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Liberty Hill, TX 78642	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guana, Melissa	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Liberty Hill, TX 78642	
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/9
2 FILER NAME Liberty Hill Republican Women		3 Filer ID (Ethics Commission Filers) 00090574
4 Date 11/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hefner, Natalie	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Liberty Hill, TX 78642	
8 Principal occupation / Job title (See Instructions) Business owner		9 Employer (See Instructions) Self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helmig, Jen (Mrs.)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Liberty Hill, TX 78642	
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#: _____) Hobbs, Stephanie	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holladay, Rachel	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Liberty Hill, TX 78642	
Principal occupation / Job title (See Instructions) Mortgage Broker		Employer (See Instructions) Self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kidd, Nicole	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Liberty Hill, TX 78642	
Principal occupation / Job title (See Instructions) Yoga Instructo		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/9
2 FILER NAME Liberty Hill Republican Women		3 Filer ID (Ethics Commission Filers) 00090574
4 Date 12/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimberlin, Nicole	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Liberty Hill, TX 78642	
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lugo, Stacy	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) None
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Kate	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Leander, TX 78641	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pleak, Wendy	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snell, Amy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Leander, TX 78641	
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/9
2 FILER NAME Liberty Hill Republican Women			3 Filer ID (Ethics Commission Filers) 00090574
4 Date 12/15/2025	5 Full name of contributor Welch, Nicole 6 Contributor address; City; State; Zip Code Liberty Hill, TX 78642	7 Amount of Contribution (\$) \$40.00	
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Self	
Date 12/18/2025	Full name of contributor moore, Sarah Contributor address; City; State; Zip Code Liberty Hill, TX 78642	Amount of Contribution (\$) \$25.00	
Principal occupation / Job title (See Instructions) Assistant DA		Employer (See Instructions) Wilco	

**NON-POLITICAL EXPENDITURES
MADE FROM POLITICAL CONTRIBUTIONS**

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/1 Rpt: 9/9	2 FILER NAME Liberty Hill Republican Women	3 Filer ID (Ethics Commission Filers) 00090574
4 Date 12/31/2025	5 Payee name First Texas Bank	
6 Amount (\$) 36.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 721 183A Toll Free Rd. Liberty Hill, TX 78642	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Purchased checks for the account.
Date 12/17/2025	Payee name US Postal Service	
Amount (\$) 156.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 2655 Ranch Road 1869 656 Liberty Hill, TX 78642	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Postal services	(b) Description (See instructions regarding type of information required.) Purchased one year PO Box